STATE OF MINNESOTA DISTRICT COURT
COUNTY OF RAMSEY SECOND JUDICIAL DISTRICT
- -
The State of Minnesota,
by Hubert H. Humphrey, III,
its attorney general,
and
Blue Cross and Blue Shield
of Minnesota,
Plaintiffs,
vs. File No. C1-94-8565
Philip Morris, Incorporated, R.J.
Reynolds Tobacco Company, Brown &
Williamson Tobacco Corporation,
B.A.T. Industries P.L.C., Lorillard
Tobacco Company, The American
Tobacco Company, Liggett Group, Inc.,
The Council for Tobacco Research-U.S.A.,
Inc., and The Tobacco Institute, Inc.,
Defendants.
- -

CONTINUED DEPOSITION OF
VICTOR A. CORBETT, M.D.
VOLUME II
(PAGES 176 - 330)

STIREWALT & ASSOCIATES
P.O. BOX 18188, MINNEAPOLIS, MN 55418 1-800-553-1953

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(The following is the continued deposition of VICTOR A. CORBETT, M.D., taken pursuant to notice, at the offices of Dorsey & Whitney, Pillsbury Center South, 220 South Sixth Street, Minneapolis, Minnesota, commencing at approximately 1:15 o'clock p.m., September 22, 1997.

APPEARANCES:

On Behalf of the Plaintiffs:
Thomas C. Kayser
Robins, Kaplan, Miller & Ciresi LLP
Attorneys at Law
2800 LaSalle Plaza
800 LaSalle Avenue
Minneapolis, Minnesota 55402-2015

On Behalf of Lorillard Tobacco Company Limited:
Elizabeth Hoene Martin
Doherty, Rumble & Butler
2800 Minnesota World Trade Center
30 East Seventh Street
Saint Paul, Minnesota 55101-4999

On Behalf of Lorillard Tobacco Company Limited:
Clyde W. Curtis
Shook, Hardy & Bacon LLP
One Kansas City Place
1200 Main Street
Kansas City, Missouri 64105-2118

On Behalf of Philip Morris Tobacco Company:
Mark Ginder
Dorsey & Whitney
Pillsbury Center North
620 South Sixth Street
Minneapolis, Minnesota 55402

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I N D E X

Victor Corbett, M.D.
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VICTOR CORBETT, M.D.
called herein as a witness, being
previously duly sworn testified as follows:
ADVERSE EXAMINATION
BY MR. KAYSER:
Q. Dr. Corbett, this is a continuation of your deposition that started a week ago today. I'd like to remind you that you're still under oath.
A. Yes.
Q. In the week that has past since we were last here do you have any changes or modifications or clarifications to your testimony?
A. Not that I can think of right this minute.
Q. If I gave you a couple of minutes just to sit and contemplate the issue might you come up with a different answer?
A. I can't answer that. I don't know for sure, but I doubt it.
Q. Would you like to take about a five minute break and just contemplate your testimony from a week ago and see if there are any clarifications or changes you would like to make?
A. Unless Counsel would like to.
Q. Fortunately or unfortunately, depending, or I don't your view point, Counsel cannot testify on this

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matter so it's you who has to make the --
A. No, I'm fine.
Q. Doctor, a week ago when we were going through some of the documents you told me that you would be upset if you found out that the cigarette companies in this case had not disclosed over the years the harmful health effects they knew resulting from cigarette smoking. Do you recall that?
A. Yes.
Q. In the week that has passed since we were last here have you asked to look at any document in the custody of the cigarette companies that might address your concern about the cigarettes suppression information over the years about the harmful effects of cigarette smoking?
A. No.
Q. In the week that has past since your last deposition have you asked the cigarette companies to see any of the documents for which they claim the attorney-client privilege that might bear on what they have known over the years about the harmful effects of cigarette smoking?
A. No.
Q. Doctor, in the week that has past since we were last here have any of the cigarette company lawyers

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volunteered to show you any documents that would show you about the information the cigarette companies have suppressed over the years about the harmful effects of cigarette smoking?
A. No.
Q. Doctor, in the week that has past since we were last here did you ask to talk to the any of the executives of any of the cigarette companies in this case to talk about whether those companies had suppressed information over the years about the harmful effects of cigarette smoking?
A. No.
Q. Are you familiar with the book or treat us by Robbins, Pathologic Basis of Disease?
A. The text book of pathology?
Q. Yes.
A. It's the textbook that we used when I was in medical school.
Q. Have you referred to it since medical school?
A. I have, but not recently.
Q. Is it an authoritative work on what it purports to discuss?
A. It certainly is a -- considered a reputable reference book for pathology.
MR. KAYSER: Off the record.

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(Discussion held off the record.)
BY MR. KAYSER:
Q. Doctor, I have shown you what has previously been marked in these depositions as Plaintiffs' Exhibit 3525 which is entitled High Risk Profiles for Initial Home Admission. The first two authors are Alan Jette and Laurence Branch. Do you have that document in front of you?
A. I do.
Q. Apparently have you seen it before because it appears to have your handwriting on it with marks on it?
A. It does and I have.
Q. When was the first time you saw Plaintiffs' Exhibit 3525, sir?
A. Sometime within the past week.
Q. First of all, you note that it is an article that appeared in The Gerontologist magazine in 1992; is that correct?
A. Yes.
Q. Do you recognize The Gerontologist magazine?
A. Yes.
Q. Are you a subscriber?
A. No.
Q. Have you seen articles in The Gerontologist

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magazine before?
A. Occasionally.
Q. Is it a magazine which is a peer review magazine?
A. I can't answer that question. I don't know.
Q. Is it a reputable medical magazine to the best of your knowledge?
A. To the best of my knowledge it's reputable.
Q. I would like to direct your attention specifically to page 635, the second page, the upper left-hand corner.
Do you see that it's a study of sixteen hundred and twenty-five people across the State of Massachusetts?
A. Yes.
Q. Do you recognize the authors Mr. Jette or Mr. Branch?
A. No.
Q. Or any of the other authors?
A. No.
Q. Are you a member of The Gerontologist Society?
A. No.
Q. I would like to direct your attention to page 637, sir, lower right-hand corner, table number 4. You have to answer audibly.

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A. Yes.
Q. Do you see -- strike that. When you were reviewing Plaintiffs' Exhibit 3525 did you review this table, that is table 4?
A. Yes.
Q. And do you see where it says that a male who has ever smoked has a 2.61 times chance of going into a nursing home as a male who has never smoked?
A. Yes.
Q. Is that consistent with your experience, sir?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I just don't have any way of answering that in terms of my experience. I don't think the numbers are odd.
BY MR. KAYSER:
Q. Pardon?
A. I don't have that high enough number to answer that question adequately.
Q. When you say you don't have a high enough number, what do you mean?
A. Well, I think you have to have a certain number of patients who are admitted to the nursing home who would -- who had smoked or not smoked so that you could come to your own conclusions, and I don't think I have a high enough number to answer that question

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offhand.
Q. You don't have enough experience in nursing home admissions to answer that question; is that right?
A. In terms of having enough number to show smokers versus non-smokers have a two and a half times admission, yes.
Q. Do you have any information that would let you answer the question as to --
A. From my experience?
Q. Yes.
A. No.
MR. KAYSER: Off the record.
(Discussion held off the record.)
BY MR. KAYSER:
Q. Doctor, as you go down table 4 do you see where it says need factors, neurological condition?
A. Yes.
Q. Do you note that a person with distant relatives has a 15.70 times chance of going to a nursing home? Do you see that?
A. Yes.
Q. Is that consistent with your experience, sir?
A. I think --
MS. MARTIN: Objection. Foundation.
THE WITNESS: You know the way this is

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defined in the paper, I think I probably would have to agree with it based on my own experience.
BY MR. KAYSER:
Q. And neurologic condition, one neurologic condition is stroke; isn't that right, sir?
A. Yes.
Q. Do you agree that a prime cause of stroke is cigarette smoking?
MS. MARTIN: Object to the form.
THE WITNESS: It's one associated -- one of the associations is smoking and stroke.
BY MR. KAYSER:
Q. So there is a connection between cigarette smoking and stroke; is that correct, sir?
A. There is an association.
Q. How strong is that association?
A. I can't answer that right offhand.
Q. Do you have any idea?
A. Not offhand.
Q. Where would you have to look to find out?
A. I think I would have to go back to a textbook or a paper.
Q. What textbook would you refer to?
A. One of the textbooks of medicine.
Q. Any particular one?

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A. Well, I have Steiner at home.
Q. Steiner?
A. I think that's the primary authors name.
Q. What is Dr. Steiner writing about?
A. It's just a general textbook of medicine covering all topics, neurology being one of them, and he probably has a sub-author writing on this one, so --
Q. Doctor, I want to show you what we have talked about last week in Plaintiffs' Exhibit 3319 which is from the 1989 Surgeon General's report.
At the top paragraph first bullet point it says cigarette smoking is a major cause of cerebral vascular disease, stroke, third leading death in the United States. Do you see that, sir?
A. Yes.
Q. Do you agree with that sentence from the Surgeon General's report on page 12 of Exhibit 3319?
A. I think that there certainly is an association between cerebral vascular disease and strokes.
I don't know if I can comment as to the frequency. I have not seen the whole statement or article.
Q. Well, from your experience and from the literature that you've read as a practicing physician

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in the City of St. Paul since 1974 do you know that cigarette smoking is a major cause of stroke?
A. I think it certainly is a strong association.
Q. Cigarette smoking is strongly associated with strokes; is that right?
A. I think there is an association.
Q. You just used the word strong association. Are you backtracking that now?
A. I'm not backtracking. I'm not here to define strong versus --
Q. I was using your words, sir.
A. I understand.
Q. Now, if you would turn the page of Exhibit 3525, Doctor. We're now on page 638. Actually, Doctor, we're done with this exhibit.
Now, Doctor, I'm showing you what has been marked as Plaintiffs' Exhibit 3526 in this matter. I'm handing your copy to Counsel.
A. Yes.
Q. Have you seen this document before today, sir?
A. Yes.
Q. When?
A. Sometime within the past week.
Q. Are you familiar with the Framingham study prior to this litigation, Doctor?

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A. Yes.
Q. Can you tell me what the Framingham study was?
A. Generally Framingham study was an ongoing study of a population of a small Massachusetts community where they followed the community's health -- the members of the community's health throughout a linear period of time.
Q. Is it a study that is considered reputable in the medical community?
A. Yes.
Q. Doctor, I'd like to have you take a look at page 151 in the lower left hand -- actually it's the middle paragraph.
Doctor, do you see there where it says, "Cigarette smoking is associated with Medicare reimbursements that are sixteen percent higher compared to non-elevated risk status?"
A. I do.
Q. Is that consistent with your experience, sir?
A. I can't comment. I don't have that sort of information.
Q. You don't have that much experience?
A. I don't think I can answer in terms of cost differences personally.
Q. Why is that?

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A. I don't have enough experience. I don't cost account out costs.
Q. Perhaps you will have the same answer to the next question, but if you go over to the opposite side of the page, the last few sentences on page 151 of Plaintiffs' Exhibit 3526, do you see where it says "In persons eighty-five years of age, profiles with elevated risk for both smoking and blood pressure are associated with Medicare costs that are over one hundred percent higher for women and over two hundred percent higher for men than for persons with nonelevated risk?"
A. I do.
Q. Is that consistent with your experience?
A. I don't cost account my patient's stays or nursing home stays. I don't think I have that information.
Q. You don't have the experience that would let you answer that question?
A. Not in terms of cost accounting.
Q. What would you have to do to answer that question, sir?
A. I would have a series of people followed to the nursing homes who had the same risk factors, monitor them for a period of time, get their costs.

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Q. Sir, I'd like to have you turn to the next page which is page 152, Plaintiffs' Exhibit 3526. I'd like to have you read the last two paragraphs on the left-hand side of the page on the discussion where it starts with the evidence on the ability. Do you see that, sir?
A. Yes.
Q. I don't want you to read it out loud.
A. Thank you.
Q. I just want you to read it to yourself and then we will talk about it. Tell me when you're done.
MS. MARTIN: Are you talking about this page?
MR. KAYSER: Yes. Down the left here.
BY MR. KAYSER:
Q. So there is no misunderstanding, the left-hand side starting with the evidence on the ability of elderly persons, and then down to just that paragraph.
A. All right.
Q. Doctor, before I ask you questions about that paragraph, perhaps I should lay a little foundation here.
You note that Exhibit 3526 was published in the American Journal of Preventive Medicine. Do you see

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that, sir?
A. Yes.
Q. Is the American Journal of Preventive Medicine a reputable medical journal, sir?
A. I think so.
Q. This is a document from 1993?
A. Yes.
Q. Do you know any of the authors of that article, sir?
A. No.
Q. Turn to page 152 of Exhibit 3526. Doctor, starting at that -- beginning of that paragraph. Do you agree, "The evidence on the ability of elderly persons to modify and reduce risk levels and on the impact of reduced risk on subsequent health status varies for each risk factor?"
MS. MARTIN: Objection. Foundation.
THE WITNESS: I'm sorry. Where are you?
BY MR. KAYSER:
Q. Right at the beginning of the paragraph. We're going to go through these sentence by sentence that you've just read to yourself, sir.
A. I think I missed this paragraph.
Q. Which paragraph?

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A. The next one down.
MR. KAYSER: Off the record.
(Discussion held off the record.)
BY MR. KAYSER:
Q. Did you read this paragraph to yourself?
A. Give me a minute. I started below.
Q. Start on the evidence on the ability and read that whole paragraph and tell me when you're done.
A. All right.
Q. You've read the paragraph on 152, Exhibit 3526 that begins, the evidence on the ability?
A. Yes.
Q. Doctor, let's take the first sentence there where it says, "The evidence on the ability of elderly persons to modify and reduce risk levels and on the impact of reduced risk on subsequent health status varies for each risk factor." Do you agree with that, sir?
MS. MARTIN: Objection. Foundation.
THE WITNESS: That certainly would be consistent with what the paper is saying.
BY MR. KAYSER:
Q. Is it consistent with your experience as a practicing physician in St. Paul since 1974, sir?
MS. MARTIN: Objection. Foundation.

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THE WITNESS: I haven't specifically thought about it, but I don't think it would be inconsistent.

BY MR. KAYSER:

Q. Doctor, the next sentence reads, "Smoking cessation at advanced stages still reduces morbidity and mortality from heart disease and cerebral vascular disease." Do you agree with that sentence based on your experience as a practicing physician in St. Paul since 1974?

MS. MARTIN: Objection. Foundation.

MR. KAYSER: If you'll try to tell me what lacks in foundation, I'll cure it.

MS. MARTIN: It calls for a statistical study, and as far as I know the doctor has done no statistical study of his patients at all.

BY MR. KAYSER:

Q. Doctor, let me read this again so we have a clear question and clear answer.

Do you agree with the statement on page 152 in Exhibit 3526, "Smoking cessation at advanced stages still reduces morbidity and mortality from heart disease and cerebral vascular disease," based on your own experience?

MS. MARTIN: My objection stands.

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THE WITNESS: I don't think I can based on my experience.
BY MR. KAYSER:
Q. Doctor, the next sentence says, "Many investigations assessing the effects of smoking cessation on the risk of heart disease have shown that the death rates from heart disease decrease substantially almost immediately following cessation." Do you agree with that sentence, Doctor, based on your experience as a practicing physician in St. Paul since 1974?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't think without doing a study of my patients I could answer that honestly.
BY MR. KAYSER:
Q. Doctor, the next sentence reads, "A growing body of epidemiologic data suggests that smoking cessation in older people reduces risk of cardiovascular disease and death." Based on your experience as a physician in St. Paul since 1974 do you agree with that statement?
MS. MARTIN: Same objection.
THE WITNESS: Again, based on my experience, without doing a study on my patients I

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don't think I can answer that.
BY MR. KAYSER:
Q. Next it states, "In a recent study of older residents of three communities, former smokers of both sexes had rates of cardiovascular mortality equivalent to persons who had never smoked, regardless of age when they stopped smoking."
Without obviously referring to the three communities is the conclusion there consistent with your experience as a practicing physician in St. Paul since 1974?
MS. MARTIN: Same objection.
THE WITNESS: I don't think without studying my patient's population I could specifically answer that.
BY MR. KAYSER:
Q. Let's say this, if a patient comes to you and asks you whether he or she ought stop smoking what do you tell them?
A. To stop.
Q. For health reasons; is that right?
A. Yes.
Q. Let's take the next sentence. "Another study found that, among older smokers with existing cardiovascular disease, quitting reduced their risk

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of myocardial infarction and mortality."
Without reference to the other study that's referred to there do you find in the conclusions of that sentence to be consistent based on your experience as a physician practicing in St. Paul since 1974?
MS. MARTIN: Same objection.
THE WITNESS: I don't think without studying my patient population I could specifically answer that question.
BY MR. KAYSER:
Q. The next sentence says, "In another study of the relationships between cigarette smoking and heart disease mortality in an elderly population, ages sixty-five through seventy-four years, excess heart disease mortality of seventy-five percent was observed in smokers versus quitters."
Without necessarily any relation to the other study is that conclusion consistent with your experience as a practicing physician in the City of St. Paul since 1974, Doctor?
MS. MARTIN: Same objection.
THE WITNESS: I don't think I could answer that without doing a study of my patient population.

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BY MR. KAYSER:
Q. The next sentence says, "These studies confirm that, even among the elderly, morbidity and mortality rate from heart disease decline soon after cessation." As a practicing physician since 1974 do you agree with the conclusions of that statement?
MS. MARTIN: Same objection.
THE WITNESS: I don't think without studying my patient population I could answer that question.
BY MR. KAYSER:
Q. The next sentence says, "Another study on the effects of quitting on cerebral profusion among elderly smokers found that cerebral profusion levels improve in a gradual and linear manner during the first year of smoking cessation for elderly persons."
Without respect to the study itself is the conclusion consistent with your experience as a practicing physician in the City of St. Paul since 1974?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't think I could answer that without studying the patients.
BY MR. KAYSER:
Q. The next sentence says, "The authors concludes

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that smoking cessation may prevent the progression of cerebrovascular disease and ischemic heart disease."
Do you see that?
A. Yes.
Q. Is that consistent with your experience as a practicing physician in St. Paul since 1974, Doctor?
MS. MARTIN: Same objection.
THE WITNESS: I don't think I could specifically answer that without looking at my patient population and studying them.
MR. KAYSER: Would you mark this please?
(Plaintiffs' Deposition Exhibit 3343 - 2/5/70 PM memo - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I've shown you what has been marked as Plaintiffs' Exhibit 3343. It's a document -- it's a document dated February 5, 1970 from Philip Morris interoffice correspondence.
It's to a Mr. Saleeby from Mr. Landry it looks like. It has to do with the Hammon/Auerbach study. Do you see that, sir? The Hammond and Auerbach study, do you see that?
A. I can see -- I'm reading through the first paragraph, yes.

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Q. Have you seen this document before today, sir?
A. No.
Q. Were you familiar with the Hammond Auerbach study before today, sir?
A. No.
Q. About the inhalation of cigarette smoke by dogs?
A. No.
Q. You've never heard of that study?
A. No.
Q. Why don't you take a moment to read the document, sir, Plaintiffs' Exhibit 3343.
MS. MARTIN: Take your time.
BY MR. KAYSER:
Q. Have you read Exhibit 3343 now, Doctor?
A. Quickly.
Q. Do you see on the first page, the first paragraph where it says, "This is the first time that cigarette smoke as a direct agent has produced lung cancer in an animal in any reliably conducted experiment?"
A. Yes, I see it.
Q. Would that assist you in coming to the conclusion that smoking cigarettes causes lung cancer?
MS. MARTIN: Object to the form.
THE WITNESS: I think I would have to

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read the article in its entirety.
BY MR. KAYSER:
Q. Doctor, what would it take; what evidence would you have to have before you would be able to conclude that cigarette smoking causes lung cancer in human beings?
A. Well, this is in dogs, number one.
Q. I'm not asking with reference to this exhibit. Now, just tell me your view without reference to this exhibit what is it that would lead you to the conclusion -- what would you have to know to be able to say that cigarette smoking causes lung cancer in humans?
A. First of all, I have not read any of the literature in causality because I have not been asked to look at any literature on causality, but what I have looked at looks like a statistical association, and I don't think if we have any hard evidence in terms of etiology of the mechanics etiology causality, but that's what I would like to look at.
Q. I'm not sure you've answered my question. What would you have to see; what is it that you would have to see before you were able to say that cigarette smoking causes lung cancer?
MS. MARTIN: Objection. Asked and

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answered.
THE WITNESS: I think I've said that I would like to look at and find a mechanism of cause before I'll say cause.
BY MR. KAYSER:
Q. Do you believe that Plaintiffs' Exhibit 3343 shows a mechanism for causing lung cancer in dogs as a result of inhaling cigarette smoke?
THE WITNESS: First of all, I have not read the entire article, and I can see that there is increased incidence, but I don't know if that gives us a mechanism or just an increased incidence.
BY MR. KAYSER:
Q. Let's take a look at the second page, Doctor, of Plaintiffs' Exhibit 3343. Do you see the table -- it says, "Table I summarizes important results." Do you see where it says, "In these researchers' tests it appears that all of the factors examined were worse the greater the duration and degree of smoking?"
A. Yes.
Q. As a physician practicing medicine would you want to see a study such as this to be able to advise your patients with respect to cigarette smoking and cancer?
A. I think any information that I might have might

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be helpful.
Q. Well, do you think this particular information since it deals with cigarette smoke being inhaled in the lung of dogs would be more helpful, run of the mill statistical information that you seem to be so concerned about? Let me withdraw that question and start over.
A. Good.
Q. Doctor, you see that this Exhibit 3343 examines a research project wherein cigarette smoke was inhaled by dogs? Do you see that?
A. Yes.
Q. And do you see that the result of that research show an increase in emphysema with respect to those dogs that inhaled the cigarette smoke relative to those that did not?
A. Yes.
Q. And do you see that the rate of emphysema went up depending on the increased cigarette smoke?
A. Yes.
Q. Do you also see that the percentage of lung lobes with tumors increased with the increase of cigarette smoke?
A. Yes.
Q. Is that the sort of information you would like

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to have -- strike that. Do you think that that is -- shows the mechanism of showing lung cancer in dogs as a result of inhaling cigarette smoke?
A. I -- no.
Q. Why not?
A. I don't think it shows the mechanism. It shows the association.
Q. It only shows an association, Doctor?
A. I don't think it shows the mechanism.
Q. Do you think that the inhalation by those dogs of cigarette smoke that caused them to have emphysema?
A. There appears to be an association.
Q. Well, what would there have to be for you -- what would you have to know or what more evidence would you have to have with respect to this study in Exhibit 3343 before you would be able to say that the inhalation of cigarette smoke caused those dogs to have emphysema?
A. Again, I think when I'm talking about causality I would like to know the mechanism of cause as opposed to association.
Q. Would you explain that for me; would you elaborate on that?
A. I think there is an increasing numbers with

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this, but it doesn't say how it happens.
Q. Is this study meaningless for you, Doctor?
A. No. I'm not implying that.
Q. Well, is it meaningful in any way for you as a physician treating patients?
A. I think it shows an increased association.
Q. Would you advise your patients that of an increased association between cigarette smoking and emphysema?
A. I think I would have to, yes.
Q. Would you also want to advise your patients of the increase of the association between the inhalation of cigarette smoke and the percentage of lung lobes with tumors?
MS. MARTIN: Object to the form. Are you referring to this study?
MR. KAYSER: Yes.
BY MR. KAYSER:
Q. Would this be the kind of information that would be helpful in discussing cigarette smoking and lung cancer with your patients?
A. I think in general the information would be helpful.
Q. Do you think it would be meaningful for you in telling your patients that they should stop smoking;

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would this be added ammunition for you to get your patients to stop smoking?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I think that's probably speculation on how they would respond to it, but --
BY MR. KAYSER:
Q. I'm talking about you as a physician, notwithstanding how your patients might respond, would it be helpful for you as a physician?
A. A physician may never know the way his patients are going to respond in the same way as a lawyer may never know how his clients are going to respond in advice.
Q. But would you want to have the information contained in Exhibit 3343?
A. Any information would be helpful.
Q. Do you think the information in Exhibit 3343 showing the increase of percentage of lobes with tumors in the dogs that inhaled cigarette smoke would be helpful in telling your patients?
A. It might be.
Q. It only might be?
A. I can't answer in terms of absolute speculation as to how it would be.
Q. I'm not talking about how your patients would

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take it. I'm talking about how you would use it. If it's an important information to you --
A. I don't -- I think in general it's helpful information. Specifically I don't think I can answer that.
Q. Do you think that the folks at Philip Morris, Doctor, should have made public the information in Exhibit 3343 to the general public?
MS. MARTIN: Objection. Foundation. Assumes facts not in evidence.
THE WITNESS: I don't know what their obligation was.
BY MR. KAYSER:
Q. Do you think the folks at Philip Morris had a moral obligation to make public the information that they had with respect to Exhibit 3343?
MS. MARTIN: Objection. Foundation. Assumes facts not in evidence.
THE WITNESS: I think it would have been helpful.
BY MR. KAYSER:
Q. Do you think it would have been helpful for the general public?
A. Yes.
Q. Do you think it would have been helpful for

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physicians who treat patients?
A. Probably.
Q. Why do you think that?
A. Again, I think information is helpful in making judgements.
Q. What kind of information?
A. Any information in terms of how products affect health.
Q. Doctor, if Philip Morris Company failed to make public the information that they were aware of in Exhibit 3343 do you think they would have breached the moral obligation?
A. I don't know if I can answer that.
Q. Why not?
A. It may be, depends on who's -- who's defining that.
Q. I want you to define the moral obligation here; I want you to define the moral obligation the same way I presume you raised your children with and the set of moral standards that you have as you sit here today.
So in that context do you think that if Philip Morris knew the information contained in Exhibit 3343 and failed to make it public they would have breached their moral obligation?

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A. I think in the way you've defined it, yes.

MR. KAYSER: Would you mark this for me please?

(Plaintiffs' Deposition Exhibit No. 3344 - 2/11/70 Auerbach/Hammond paper - marked for identification.)

BY MR. KAYSER:

Q. Doctor I'm showing you what has been marked Plaintiffs' Exhibit 3344 which as you can see says Auerbach/Hammond paper, and it's from Brown & Williamson. Have you read that before today, sir?

A. No.

Q. Well, if you look on the second page, lower left-hand corner, you can see it's from February 11, 1970 and refers to the same document that we were just looking at.

I'd like to have you drop down to paragraph 3, Doctor.

A. On the second page?

Q. First page. Do you see where it says, "Looking at the tabulated results, the two areas which are dangerous are incidence of emphysema after smoke; the controls are free so it is reasonable to conclude that smoking brings on an emphysemic condition. A similar conclusion can be drawn from the arteriolic thickening results?"

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A. Yes.
Q. Do you believe as you sit here right now that it's reasonable to say that smoking brings on an emphysemic condition?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't think -- without reviewing the article I don't think I can answer that question.
BY MR. KAYSER:
Q. I'm talking now based on your experience as a physician treating patients in the City of St. Paul since 1974. Do you believe that it's reasonable to conclude that cigarette smoking brings on AN emphysemic condition?
MS. MARTIN: Foundation. Objection on the grounds that this doctor is not an epidemiologist.
THE WITNESS: I think without going back and doing a study of my patients I could answer that.
BY MR. KAYSER:
Q. Have had you patients who have had emphysema?
A. Yes.
Q. Do you believe any of the emphysema your patients had was brought on by cigarette smoking?

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A. I think that it may have been associated.
Q. Do you know beyond that or just may?
A. I don't think I can without a doubt say yes or no.
Q. How strong do you think that cigarette smoking has been with respect to your patients' emphysema, Doctor?
A. I guess you would have to define strong, weak, moderate for me.
Q. You used the word strong earlier today and you used the word strong last week. So would you tell me how strong you believe the association has been just in any way that you want to define it, Doctor?
Tell me how strong you believe the association has been between cigarette smoking and the emphysema in the patients you've treated over the years.
A. I think there is an association. I don't think I can define it any tighter than that, closer than that.
Q. Doctor, between last Monday and today, our last meeting, have you discussed your deposition with anyone other than the attorneys sitting in this room or any of the other attorneys that are working for the tobacco companies in this case?
A. Other than to tell people I had to give a

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deposition, no.
Q. Have you discussed the substance of the deposition with anyone?
A. No.
MR. KAYSER: Let's have this marked.
(Plaintiffs' Exhibit No. 3345 - MMA State Senate document - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you what has been marked Plaintiffs' Exhibit 3345 which purports to be testimony before the State Senate of the State of Minnesota by a gentleman named A. Stuart Hanson, M.D. representing the Minnesota Medical Association and Smoke Free 2000 Coalition.
A. Yes.
Q. Have you seen that document before today, sir?
A. No.
Q. Do you know Stuart Hanson, sir?
A. Yes.
Q. How long have you known him?
A. Since 1969.
Q. Is he a friend of yours?
A. We're acquaintances. He used to be my wife's doctor.
Q. Do you think he's a reputable physician?

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A. Yes.
Q. Do you also know him as a someone who has been president of the Minnesota Medical Association?
A. I've not known him in that capacity, no.
Q. But do you know that he was president of the Minnesota Medical Association?
A. I don't recall that actually.
Q. Are you a member of the Minnesota Medical Association?
A. Yes.
Q. How long have you been a member of the Minnesota Medical Association?
A. Since 1974.
Q. I assume you pay dues every year?
A. My office does.
Q. Perhaps you mentioned this and I just missed it; are you a friend of Dr. Hanson's or are you simply acquaintances?
A. We're acquaintances.
Q. Do you see where he is talking about representing the Minnesota Medical Association in Smoke Free 2000 Coalition?
A. Yes.
Q. Are you familiar with Smoke Free 2000 Coalition?
A. In name only.

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Q. Do you know that the Minnesota Medical Association is a part of Smoke Free 2000 Coalition?
A. I can't answer that. I don't know.
Q. Did you say you had heard of the Smoke Free 2000 Coalition before today?
A. I have.
Q. Do you support the goals of the Smoke Free 2000 Coalition?
A. I don't disagree with them.
Q. Do you agree with them?
A. Yes.
Q. Dr. Stuart in the first sentence of the second paragraph says --
MS. MARTIN: I'll object to the form. I think you want to say Dr. Hanson.
BY MR. KAYSER:
Q. I apologize. Dr. Hanson in the first sentence, in the second paragraph says, "Seventeen percent of all deaths in Minnesota are directly caused by tobacco smoking and are preventable." Do you agree or disagree with that?
MS. MARTIN: Object to the form.
THE WITNESS: I have no way of answering that. I don't have the data.
BY MR. KAYSER:

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Q. Do you believe Dr. Hanson is an honest man, sir?
A. That's been my experience.
Q. In the second sentence Dr. Hanson is speaking of the deaths in the State of Minnesota. He said that this represents about six thousand deaths in Minnesota each year. Do you agree with that, sir?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I have no data one way or the other.
BY MR. KAYSER:
Q. Dr. Hanson goes on to say, "It is estimated that fifteen percent of all health care costs in Minnesota are directly due to tobacco use, primarily cigarette smoking." Do you agree with that sentence, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I have no data to comment it.
BY MR. KAYSER:
Q. Do you have any idea of if that's true that fifteen percent of all health cares costs are directly due to tobacco use, primarily cigarette smoking?
A. No.
Q. Back to the first sentence of paragraph 2, "Seventeen percent of all deaths in Minnesota are

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directly caused by tobacco smoking and are preventable." Do you have any idea of what percentage of deaths in Minnesota are directly caused by tobacco smoking and are preventable?
A. No.
MS. MARTIN: Objection. Foundation.
BY MR. KAYSER:
Q. In the last paragraph of Exhibit 3345, Doctor, the second paragraph says, "Thirty percent of all cancer is directly related to tobacco use and is preventable." Do you agree or disagree with that statement?
A. I don't have any data to comment about that.
Q. Do you have any idea what percent of all cancer is directly related to tobacco use and is preventable?
MS. MARTIN: Objection. Foundation.
THE WITNESS: No.
BY MR. KAYSER:
Q. Dr. Hanson goes on to state that, "Ninety percent of all emphysema, a chronic lung disease leading to long-term disability, morbidity and death, is caused by cigarette smoking." Do you agree or disagree with that sentence, Doctor?
A. I don't have any specific data to answer that.
Q. Do you know what percent of emphysema is caused

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by cigarette smoking, Doctor?
A. Not offhand.
MS. MARTIN: Objection. Foundation.
BY MR. KAYSER:
Q. The last sentence by Dr. Hanson on the first page says, "It is estimated fifteen percent of all heart disease is preventable and related to tobacco use." Do you agree or disagree with that statement, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't have any specific data to comment.
BY MR. KAYSER:
Q. Are you able to estimate what percentage of heart disease is related to tobacco use and is preventable?
MS. MARTIN: Objection. Foundation.
THE WITNESS: No.
BY MR. KAYSER:
Q. Is emphysema the kind of disease that leads one to go into a nursing home, Doctor?
A. It might.
Q. Have you had patients in the past who have had emphysema and have gone into nursing homes because of that emphysema, Doctor?

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A. I don't think it's the emphysema per se that's the cause of going to the nursing home.
Q. What is the cause?
A. I think it's probably lack of support systems that would make it impossible for them to stay at home.
Q. But if they didn't have the emphysema then they would probably be able to stay at home; is that right?
A. I think that varies from patient to patient.
Q. But emphysema is a debilitating disease for human beings, is it not, Doctor?
A. It could be.
Q. And it leads for people who have emphysema to need care from others, increased care from others; isn't that right, sir?
A. It could.
Q. And heart disease is also a debilitating disease, isn't it, Doctor?
A. It could be.
Q. And heart disease is something that leads to someone needing care from others; isn't that right, Doctor?
A. It could.
Q. And have you had patients with heart disease who

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have had to go in to nursing homes, Doctor?
A. Again, I think a good share of the patients that would have to be in the nursing home for reasons other than specifically to heart disease.
Q. But if the heart disease is so debilitating to them, they can't take care of themselves, that would be one of the reasons they would go in to the nursing home; isn't that right, Doctor?
A. It would be lack of support system.
Q. They have to have a support system because of the debilitating affects of heart disease; isn't that right, sir?
A. It could, yes.
Q. Doctor, I'd like to have you turn the page. In the middle of the first paragraph do you see where it says, "Therefore the physicians of the state support the legislation to increase the cigarette tax as a means to reduce consumption." Do you see that?
A. Yes.
Q. In 1991 were you one of the physicians in this senate supporting the legislation to increase the cigarette tax as a means to reduce consumption?
A. I don't think I can answer that.
Q. Generally over the years do you believe that it would be useful to raise the cigarette tax in the

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State of Minnesota to reduce consumption?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I think maybe you could define that a little better for me.
BY MR. KAYSER:
Q. If you knew that by raising the taxes on cigarettes and increasing their costs, fewer people would smoke would you support the legislation to increase taxes?
A. I wouldn't be opposed to it.
Q. Would you support it?
A. Yes.
Q. You would support it?
A. Yes.
MR. KAYSER: Let's have this marked.
(Plaintiffs' Deposition Exhibit No. 3346 - - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you a document that has been marked Plaintiffs' Exhibit 3346. It's on the letterhead of the American Society of Clinical Oncology which appears to be abbreviated ASCO. Are you familiar with the American Society of Clinical Oncology, sir?
A. Only indirectly.

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Q. Is the American Society of Clinical Oncology a respected group of doctors who specialize in oncology?
A. I think so.
Q. Is there anyone that you've been associated with over the years who has been a member of the American Society of Clinical Oncology, Doctor?
A. I don't think I can answer that specifically.
Q. Why not? You just don't know?
A. I don't know.
Q. But you are aware before today of the American Society of Clinical Oncology?
A. I've heard of it, yes.
Q. Doctor, in the first paragraph it says, "Despite the certain knowledge that smoking causes lung cancer and other serious diseases nearly fifty million Americans continue the practice."
Now, if the American Society of Clinical Oncology believes that smoking causes lung cancer what more evidence do you need before you would believe that cigarette smoking causes lung cancer?
A. I suspect this is probably to be use in a public health type statement in terms of it being associated with rather than the way I've defined it.
Q. Do you think that both you and the American

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Society of Clinical Oncology are stating it the same way?
A. I don't think I can speak for them.
Q. Is that how you read this document?
A. I read this as a public health statement in association, not mechanism.
Q. Well, you're going to have to elaborate. I don't understand what you just said.
A. Well, I think when they say that smoking causes cancer or lung cancer that that is a public health statement that there is an association.
I guess I'm not reading this as a mechanism of a disease.
Q. Do you think that somehow they are misusing the word causes in the first sentence of Exhibit 3346, Doctor?
A. I think it's used -- I don't know how they're specifically using it, but that's how I am interpreting it.
Q. Well, let's -- you asked to define it for us, so let's see if we can define cause, shall we Doctor?
Doctor, I'm looking in the American Heritage Dictionary. "Cause: Something that produces an effect, result or consequence." Do you think that

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cigarette smoking produces the effect, result or consequence of cancer?
A. It certainly is an association.
Q. Are you differentiating association and cause as I have just defined it?
A. I don't think -- I'm still defining cause as in terms of mechanism.
Q. And you believe that that's the way the American Society of Clinical Oncology is defining cause here?
A. I don't know if they are defining it that way.
Q. Perhaps they're defining in the way that we think of it in the normal English language and usage whereas cause is something that produces an effect, result or consequence?
A. Or an association.
Q. Well, that's not what it says in the dictionary, Doctor.
A. I understand that.
Q. So do you want to define cause in a different fashion than what's defined in the dictionary?
A. I'm not here to define cause.
Q. Well, you asked me last time we were here to define cause so I'm doing that for you now.
So defining cause that is something that produces an effect, cause or consequence --

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MS. MARTIN: Objection. Asked and answered if that is a question.
MR. KAYSER: I'm just defining it in the dictionary again to assist the doctor.
MS. MARTIN: There is no question pending.
BY MR. KAYSER:
Q. "Despite the certain knowledge, that smoking causes lung cancer," do you agree or disagree with that statement as it's written, Doctor?
A. I think there is an association between smoking and lung cancer.
Q. I understand that's what you think, but I want to know whether you disagree with the sentence that "Despite certain knowledge, that smoking causes lung cancer."
A. I don't think I can answer as to their statement in this. This is a -- I don't know where the data comes from and how they derived it.
Q. Can you just tell me whether you agree or disagree with the statement?
A. No.
Q. You're unable to tell me whether you agree or disagree?
A. I don't.

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Q. Why not?
A. I think I've answered it.
Q. Well, you haven't answered it. You either agree or disagree with the statement. Can you tell me whether you agree with the statement in the American Society of Clinical Oncology that despite certain knowledge that smoking causes lung cancer?
If you disagree with it, just tell me you disagree with it.
A. If you don't accept my definition of association, then I guess I would have to disagree with it.
Q. If you take a look at the next sentence, Doctor in Exhibit 3346, "Smoking is a major contributor to our current health care crisis by creating otherwise unnecessary patient care costs for a variety of tobacco-related catastrophic illnesses." Do you agree that statement in the American Society of Clinical Oncology?
A. I don't know how they derived that statement and I don't know what the costs are, so I don't think I can agree or not agree. I just don't think I can answer that.
Q. The next sentence, Doctor, talks about the persistence of smoking in the face of widespread

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condemnation by public health officials reflects the aggressive and successful advertising techniques of tobacco companies, particularly those targeted to children and women.

Do you agree that the tobacco companies that you are working for have had success in advertising techniques targeting children and women?

MS. MARTIN: Object to form and foundation.

THE WITNESS: I don't have any data one way or the other.

BY MR. KAYSER:

Q. Over the years have you read about the advertising of tobacco products aimed at children, Doctor?

A. No.

Q. When you had young -- you have two daughters as I recall your testimony; is that right, Doctor?

A. A boy and a girl.

Q. I'm sorry. And they're how old now?

A. Eighteen and twenty-three. Nineteen and twenty-three. I'm sorry.

Q. Doctor, haven't you been concerned over the years that your children were the targets of cigarette advertising by tobacco companies?

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A. I don't know if they have been specifically targeted by the tobacco industry.
Q. Well, I assume the tobacco industry has not decided to target Dr. Corbett's children alone in this nation, but just as children in general, weren't you concerned about your children being targeted by cigarette companies in their advertising?
A. I have no opinion.
Q. I think we discussed this last week. You told me that you didn't want your children to smoke; is that right, sir?
A. That's correct.
Q. And you advised your children not to smoke; isn't that correct, sir?
A. That's correct.
Q. And you advised your children not to smoke because of health issues; isn't that right, sir?
A. I think I did.
Q. Let's drop down to the bottom of the first page, Doctor. Do you see where it says that the American Society of Clinical Oncology therefore supports a significant federal excise tax in cigarettes in the range of two to three dollars per pack?
A. Yes.
Q. Would you support legislation to raise the

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excise tax on cigarettes in the range of two to three dollars per pack, Doctor?
A. I don't think I would argue with it.
Q. Would you agree it, sir?
A. Yes.
Q. And if cigarette smoking decreased over the years do you believe our health care costs would decrease over the years as a result thereof?
A. I don't think I can answer that specifically.
Q. As a physician, Doctor, practicing medicine in St. Paul, Minnesota since 1974 do you believe that if we decrease cigarette smoking we will decrease health care costs over the years?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't have any way of answering that specifically.
BY MR. KAYSER:
Q. You just don't know?
A. I don't know.
Q. Doctor, would you turn to the second page of Exhibit 3346 please? I'd like to take the second paragraph under the facts support ASCO's recommendation. It says, "Smoking is responsible for more than one out of every six deaths in the United States, yet it is the single most preventable cause

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of death in our society." Do you agree with that statement, Doctor?
MS. MARTIN: Objection. Foundation. Asked and answered.
THE WITNESS: I don't think I have any data to answer that question.
BY MR. KAYSER:
Q. Were you finished?
A. Yes.
Q. Let's break the question in two parts then. Do you believe that smoking is the most preventable cause of death in our society based on your experience as a practicing physician in St. Paul since 1974?
A. I don't think I have any data to answer that question.
Q. You have no idea, Doctor?
A. No.
Q. The next paragraph, Doctor, says, "Smoking causes ninety percent of all lung cancers, the most prevalent and deadly of all cancers." Do you agree with that statement, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I think that there is an association between lung cancer and smoking in

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that realm.
BY MR. KAYSER:
Q. In the realm of ninety percent?
A. Yes.
Q. Do you agree with the next sentence, Doctor, that says, "Lung cancer has surpassed breast cancer as the leading cause of cancer in men and women?" Do you agree with that?
A. I think that the incidence of lung cancer is now higher than breast cancer in women.
Q. And that's as a result of women smoking more; is that right, Doctor?
A. There seems to be that association.
Q. Do you believe that, sir?
A. Do I believe that association?
Q. Yes.
A. Yes.
Q. Let's turn to the last page, Doctor, of Plaintiffs' Exhibit 3346. The last paragraph says, "After more than twenty-five years of discussion regarding the detriments of smoking, overall usage has declined only slightly, as tobacco companies have found new targets in the young and in females." Does this assist you in your recollection of tobacco company advertising being aimed at adolescents,

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teenagers?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I just don't think I have the data to answer that.
MR. KAYSER: Can we take a break?
(Recess taken.)
MR. KAYSER: Let's have this marked.
(Plaintiffs' Deposition Exhibit No. 3347 - MMA letter - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you what has been marked Plaintiffs' Exhibit 3347.
A. Yes.
Q. You'll see that that's on Minnesota Medical Association letterhead; is that right, sir?
A. That's correct.
Q. And do you see in the upper right-hand corner Thomas A. Stolee, M.D. as the president of the Minnesota Medical Association?
A. Yes.
Q. Do you know Dr. Stolee?
A. No.
Q. You've never met him?
A. No.
Q. Do you see that as of 1992 A. Stuart Hanson,

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M.D. was the president elect?
A. I see that.
Q. Does that refresh your recollection that Dr. Hanson, in fact, became president of the Minnesota Medical Association?
A. I have to agree.
Q. Is there any doubt in your mind that this letter from Dr. Stolee actually came from the Minnesota Medical Association and was signed by him?
A. I would have to assume that because it's on letterhead stationary that it's representing the Minnesota Medical Association.
Q. Are you familiar with the Tobacco Licensing Act?
A. No
Q. I would refer you to the second paragraph, Doctor, of Exhibit 3347, the second sentence. I'm going to ask you whether you agree with the sentence. It says, "Stopping children from buying cigarettes helps prevent them from developing the long term nicotine habit that can kill them as an adult." Do you agree with that sentence, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't know how the circumstances of how the data was gathered that would lead to that conclusion.

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BY MR. KAYSER:
Q. Well, what data would have to be gathered, Doctor?
A. I don't know how they're drawing that conclusion.
Q. Well, do you agree with the thought that we should stop children from buying cigarettes?
A. Yes.
Q. Do you believe that stopping children from buying cigarettes helps prevent those children from developing a long-term nicotine habit?
A. I don't know if I can answer that question directly.
Q. Why not?
A. Because I'm not sure how that buying the cigarettes and the nicotine habit can be directly linked.
Q. Well, presumably the children, Doctor, are going to buy the cigarettes and then smoke them. Do you understand that to be the case?
A. That's an assumption.
Q. Do you think they're going to buy the cigarettes and throw them away?
MS. MARTIN: Object to the form of the question and instruct the witness not to answer.

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MR. KAYSER: On what basis?
MS. MARTIN: It's argumentative and dumb.
MR. KAYSER: That's not a reason that he can't answer the question.
THE WITNESS: I would assume that they would either smoke or sell them.
BY MR. KAYSER:
Q. Let's assume -- let's talk about the children that are going to smoke the cigarettes, Doctor. You understand that what Dr. Stolee is concerned about is those children who buy the cigarettes and smoke them may develop a long-term nicotine habit. Do you see that?
MS. MARTIN: Object to foundation.
THE WITNESS: Is that -- I'm sorry. You're assuming that that's what they're -- maybe you could restate the question.
BY MR. KAYSER:
Q. Dr. Stolee is writing State Senator Belanger. Do you see that?
A. Yes.
Q. He is asking Senator Belanger and supports and votes for the Tobacco Licensing Act.
A. Yes.

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Q. And one of the reasons that he would like to stop children from buying cigarettes is because those children who buy cigarettes and smoke them may develop a long-term nicotine habit; isn't that his concern?
A. That appears to be his concern.
Q. Would that be a concern of yours too, Doctor?
A. I think for health reasons I would back this.
Q. You would back what Dr. Stolee is talking about in this letter; you would support him in that?
A. I think for general health reasons I would support the stopping of the smoking, what we can do to stop smoking.
Q. Let's talk about smoking with children, Doctor.
A. Yes.
Q. Are you concerned about children smoking and developing a long-term nicotine habit?
A. I'm concerned with children smoking.
Q. Is one of your concerns about children smoking is they might develop a long-term nicotine habit?
A. They might.
Q. And that is within your experience something that often happens with people; isn't that right, sir; they have a long-term nicotine habit?
MS. MARTIN: Objection. Foundation.

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THE WITNESS: I think there are a number of patients I see who smoke for long periods of time.
BY MR. KAYSER:
Q. And they've developed a long-term nicotine habit, haven't they, Doctor?
A. They certainly smoke for a long time.
Q. That's because they have a long-term nicotine habit; isn't that right, Doctor?
A. I don't know if I can specifically answer that.
Q. Do you disagree with Dr. Stolee's comment that that long-term nicotine habit can kill them as an adult, kill those children as adults?
A. I think long-term use of nicotine or smoking can be associated with an increased risk for dying.
MR. KAYSER: Would you mark this?
(Plaintiffs' Deposition Exhibit 3348 - MMA news release - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you a Minnesota Medical Association news release dated January 23, 1990?
A. Yes.
Q. Do you have that in front of you, sir?
A. Yes.
Q. Do you have any doubt that this is a news

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release from the Minnesota Medical Association, Doctor?
A. No.
Q. Doctor, as a member of the Minnesota Medical Association since 1974 have you received news releases of this nature from time to time?
A. I believe I have.
Q. Do these news releases purport to state the policy position of the Minnesota Medical Association on whatever subject is discussed therein?
A. That would be my understanding.
Q. In this particular news release, Doctor, you can see the Minnesota Medical Association is calling for a total ban on cigarette vending machines and on the sale of cigarettes to anyone under the age of twenty-one. Do you see that, Doctor?
A. Yes.
Q. Do you support as a physician practicing medicine in St. Paul since 1974 the total ban on cigarette sales to anyone under the age of twenty-one?
A. Yes.
Q. Doctor, as a practicing physician in the City of St. Paul do you also support the total ban on cigarette vending machines?

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A. I think that would be a good idea, yes, I would agree.
Q. Doctor, I'd like to refer you to the second paragraph of Plaintiffs' Exhibit 3348. It says, "Because a life-long addiction to nicotine often begins during teen years, the Minnesota Medical Association has targeted teenage smoking." Do you see that?
A. Yes.
Q. Do you agree that a life-long addiction to nicotine often begins during the teen years as stated in the policy position of the Minnesota Medical Association?
MS. MARTIN: Object to the form of the question.
THE WITNESS: I don't think I can comment as to how they arrived at that.
BY MR. KAYSER:
Q. Well, you see that it's -- as you say this is a policy position of the Minnesota Medical Association. You agreed to that, right?
A. Yes.
Q. And the Minnesota Medical Association's policy and position is that, "Because a life-long addiction to nicotine often begins during the teen years." Do

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you agree with that statement --
MS. MARTIN: Object to the form.
BY MR. KAYSER:
Q. -- as a doctor practicing in St. Paul since 1974?
A. I don't think I personally have the data to comment on that.
Q. Doctor, drop down to the second to the last paragraph if you would, sir, of Exhibit 3348.
A. Yes.
Q. Do you agree with the position that the Minnesota Medical Association says, "Every day one thousand people in the United States die from smoking cigarettes?"
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't think I personally have the data to comment about this.
BY MR. KAYSER:
Q. How many people do you think in the United States die every day from smoking cigarettes, Doctor?
A. I don't know.
Q. Do you have any idea?
A. No.
Q. Is it a lot?
MS. MARTIN: Objection. Foundation.

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THE WITNESS: I don't know.
BY MR. KAYSER:
Q. Doctor, the second sentence says, "Smoking causes greater loss of life than heroin, cocaine, alcohol accidents, fires, murder and suicide combined." Do you agree with that sentence, Doctor?
A. I don't have the data to comment on that.
MS. MARTIN: Objection. Foundation.
BY MR. KAYSER:
Q. Doctor, the last sentence in the second to last paragraph of Exhibit 3348 says, "Smoking is a serious threat to the health of young people in Minnesota." Do you agree with that policy statement of the Minnesota Medical Association, Doctor?
A. Yes.
Q. Pardon me?
A. Yes.
MR. KAYSER: Would you mark this?
(Plaintiffs' Deposition Exhibit 3349 - marked for identification.)
BY MR. KAYSER:
Q. Doctor, showing you what has been marked Plaintiffs' Exhibit 3349. If you look in the lower right-hand corner you will see it's from the American Medical Association.

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I don't have the date, but as you can see the opening sentence says, "In the spirit of openness expressed by President Clinton," so obviously it's after 1992. Would we agree on that?
A. I would have to assume that.
Q. Probably after 1993 since he was sworn in January of 1993.
A. I agree.
Q. Have you seen this Exhibit 3349 before today, sir?
A. No.
Q. Are you a member of the American Medical Association, sir?
A. Recently.
MS. MARTIN: Asked and answered.
MR. KAYSER: We talked about the Minnesota Medical Association. This is --
MS. MARTIN: That was last week.
THE WITNESS: Recently.
BY MR. KAYSER:
Q. When did you join the American Medical Association, Doctor?
A. July, 1997.
Q. Had you been a member of the American Medical Association any time prior to July, 1997?

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A. No.
Q. Let me go back for a moment. Have you ever served on any committees for the Minnesota Medical Association, Doctor?
A. No.
Q. Are you a member of any groups or committees where you have served as an officer; any sub-group of the Minnesota Medical Association you're a part of?
A. No.
Q. What compelled you to join or what led you to join the American Medical Association in July of 1987?
A. It was accidental. My secretary sent the check to the wrong organization.
Q. Are you going to renew your membership after this year?
A. I don't have any idea.
Q. I believe the American Medical Association is a respected organization of physicians, Dr. Corbett?
A. Well, it's certainly an organization of physicians.
Q. Do you respect it as an organization?
A. In general.
Q. What qualifications do you have?

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A. I think it's probably a political organization.
Q. What don't you like about politics?
A. Offhand I can't comment.
Q. You just don't know or you don't want to tell me?
A. I don't know.
Q. Doctor, the third paragraph of Plaintiffs' Exhibit 3349, do you see that?
A. I think so.
Q. It starts with one other recommendation?
A. Yes.
Q. It says, "One of the recommendations in our proposal calls for an effective disease prevention program. Every year hundreds of thousand of our patients die from preventable diseases." Do you agree that so far?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't know how the data was collected and what it's referring to.
BY MR. KAYSER:
Q. It goes on to say, "Cancer, heart disease, AIDS, TB, domestic violence and the biggest killer of all is tobacco." Do you see that?
A. I see that.
Q. Do you believe that the context in which this

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paragraph is written, tobacco is the biggest killer of all --
MS. MARTIN: Objection to form and foundation.
THE WITNESS: I don't think I can answer that question.
BY MR. KAYSER:
Q. Why not?
A. I don't have the data to answer this.
Q. Would you say every year hundreds of thousands of patients every year across the country die from preventable diseases?
A. I suspect that's true.
Q. And do you agree that diseases of tobacco are preventable diseases -- strike that. Do you agree that diseases that are caused by smoking cigarettes are preventable diseases?
MS. MARTIN: Object to the form.
THE WITNESS: Some of them.
BY MR. KAYSER:
Q. Which ones aren't?
A. I think there are certain people who have diseases that are not necessarily the result of smoking, but may be in general associated with smoking.

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Q. Doctor, let's drop down a little bit here. Do you see where it says, "Tobacco is a legal product that is deadly when used as directed?"
A. Yes.
Q. Do you agree with that?
A. I don't disagree with that.
Q. Do you agree with that?
A. In general.
Q. Do you see the next paragraph, Doctor, that says - speaking of tobacco - "it is as addictive as cocaine or heroin." Do you agree with that?
MS. MARTIN: Object to the form of the question.
THE WITNESS: I don't believe I have the data to answer that question.
BY MR. KAYSER:
Q. Do you agree that cigarette smoking is addictive?
MS. MARTIN: Object to the form.
THE WITNESS: I think certainly a number of people who smoke have a hard time stopping.
BY MR. KAYSER:
Q. Do you think for those people it's addictive?
A. I guess it would be how you -- it would depend how you define addiction.

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Q. Drop down, Doctor. Do you see where it says, "Additionally, forty thousand non-smokers die every year die from secondhand smoke?" Do you agree with that, Doctor?

MS. MARTIN: Objection. Foundation. I don't have data to make an assumption one way or the other.

BY MR. KAYSER:

Q. I believe you agreed with me last week that cigarette smoke is harmful, correct?

A. I don't disagree with that.

Q. You agree with it, don't you?

A. Yes.

Q. Doctor, you do you agree with the last sentence on the left-hand column of Plaintiffs' Exhibit 3349 where it says that cancer and heart disease caused by cigarettes can be prevented? Do you agree with that?

A. I think that by decreasing you should be able to decrease the incidence of the associated disease.

Q. Such as cancer and heart disease?

A. That would -- yes.

Q. Doctor, over in the right-hand side, dropping down almost to the middle of the page, the American Medical Association sometime after January 20, 1993 recommends that tobacco be placed under the control

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of the Food and Drug Administration. Do you support the American Medical Association's position on that and you believe that --
MS. MARTIN: Objection. Form.
THE WITNESS: I don't know.
BY MR. KAYSER:
Q. Why not?
A. I just don't have enough information to make a judgment.
MR. KAYSER: Let's have this marked please.
(Plaintiffs' Deposition Exhibit No. 3350 - MMA letter - marked for identification.)
BY MR. KAYSER:
Q. Doctor, showing you what has been marked as Plaintiffs' Exhibit 3350. As you see, that's a letter by Thomas A. Stolee, M.D., president of the Minnesota Medical Association dated February 17, 1992, again, to Senator Belanger --
A. Yes.
Q. -- on a different topic than the first one. Do you see that?
A. I'd have to read it.
Q. You can see --
A. It's different than previously.

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Q. Do you have any doubt that this is in truth a letter from Thomas Stolee, president of the MMA to Senator Belanger?
A. I have no reason to doubt it.
Q. Are you familiar with the Minnesota Clean Indoor Act?
A. In general.
Q. Do you support the Minnesota Clean Indoor Act, sir, based on your experience as a practicing physician in St. Paul since 1974?
A. Yes.
Q. In this tickler President Stolee is speaking about secondhand smoke, is he not, sir?
A. Quickly perusing that, that's my understanding.
Q. In the third paragraph of President Stolee's letter on MMA stationary to Senator Belanger he says, "The evidence is overwhelming that serious health risks are greatly increased in both smokers and those forced to breath secondhand smoke." Do you agree with that, Doctor?
MS. MARTIN: Objection.
THE WITNESS: I don't have the data that he is referring to so I don't know if I can comment on that.
BY MR. KAYSER:

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Q. Just from your own experience, Doctor, do you believe based on your experience as a physician in St. Paul since 1974 do you agree that there is over -- the evidence is overwhelming that serious health risks are greatly increased in both smokers and those forced to breath secondhand smoke?

MS. MARTIN: Objection. Foundation as earlier.

THE WITNESS: I don't have any personal evidence.

BY MR. KAYSER:

Q. Do you regard Dr. Stolee as an honest man, sir?

A. I don't know Dr. Stolee.

Q. Do you think the president of the Minnesota Medical Association would lie about something like that, Doctor?

A. I would assume not.

Q. Would you assume that -- do you assume that the president of the Minnesota Medical Association writing to a state senator would tell the truth?

A. I would hope so.

Q. Would you expect the president to do that, sir?

A. I would expect that.

Q. Doctor, in the next paragraph you say smoking is the also the leading preventable cause of fetal death

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and injury. Do you agree with the Minnesota Medical Association president with respect to that sentence?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't have the data to comment on this one way or the other.
BY MR. KAYSER:
Q. Second to last paragraph the president of the Minnesota Medical Association on February 17, 1992 says and, Passive smoke causes approximately three thousand eight hundred lung cancer deaths each year in America. Do you agree with that, Doctor?
MS. MARTIN: Objection to the foundation.
THE WITNESS: I don't have any data to comment on this.
BY MR. KAYSER:
Q. Pulling out the number of thirty-eight hundred would you agree, Doctor, that passive smoking causes lung cancer deaths in America each year?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I just don't have the data one way or the other to comment on this.
BY MR. KAYSER:
Q. Doctor, if a patient came to you and said that he or she is working in a workplace and forced to

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breath secondhand smoke and is there any danger in that what would you tell that individual?
A. I would tell him that there is associated problems with breathing secondhand smoke.
Q. Are you associated adverse health problems?
A. Yes.
MR. KAYSER: Let's take a short break.
(Recess taken.)
MR. KAYSER: Would you mark this for me please?
(Plaintiffs' Deposition Exhibit No. 3351 - Star Tribune article - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'd like to -- I've shown you Plaintiffs' Exhibit 3351 which is a report from the Star Tribune dated Wednesday, September 17, 1997.
As you'll note, it is a report of the Minnesota Medical Association convention in early September, 1997; is that correct, sir?
A. That's my understanding.
Q. Did you attend that convention, Doctor?
A. No.
Q. But are you aware that the Minnesota Medical Association has a convention every year some place in Minnesota?

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A. Yes.
Q. Have you attended any of those conventions?
A. No.
Q. As a member of the Minnesota Medical Association if you wish to attend one of those annual conventions you would be allowed to do so, wouldn't you?
A. I would hope so.
Q. As a dues' paying member?
A. As a dues' paying member.
Q. So the fact you don't attend is your voluntary choice?
A. That's correct.
Q. Do you see in the opening paragraph it says, "Minnesota children ought to be in a smoke-free environment both at home and in child-care centers, the six thousand-member Minnesota Medical Association said Tuesday." Would you consider that a policy statement of the Minnesota Medical Association, Doctor?
A. I would make that assumption. I don't know for sure.
Q. But just by reading that paragraph.
A. I would assume that.
Q. Well, let's break it down. Do you believe that Minnesota children ought to be in a smoke-free

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environment at home?
A. If possible, yes.
Q. And if a patient came to you and had small children and asked you whether he or she ought to smoke in the house with young children or smoke outside what would you advise them?
A. Not to.
Q. Smoke outside or smoke in the home?
A. Smoke out of the home.
Q. And out of the presence of the children?
A. That's correct.
Q. And that's for health reasons for the children; is that right, Doctor?
A. Yes.
Q. And I assume then that you would -- let me ask it this way: Would you agree that child care centers also ought to be smoke free?
A. Yes.
Q. For the health of the children in those child care centers, Doctor?
A. Yes.
Q. I believe you already stated that you would support legislation not allowing people under twenty-one to smoke cigarettes; isn't that right, Doctor?

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A. I believe I did.
Q. Now, as you drop down do you see where it says Dr. A. Stuart Hanson?
A. I do.
Q. Dr. A. Stuart Hanson, a St. -- from Plaintiffs' Exhibit 3351, "Dr. A. Stuart Hanson, a St. Paul lung specialist and one of the founders of the state's Smoke Free 2000 Program" --
MS. MARTIN: Object to the form. You misread it. You said St. Paul instead of St. Louis Park.
BY MR. KAYSER:
Q. Let's start over. I quote from Plaintiffs' Exhibit 3351. "Dr. A. Stuart Hanson, a St. Louis Park lung specialist, and one of the founders of the state's Smoke Free 2000 program, said secondhand smoke can cause major health problems in children, especially those with asthma and other respiratory problems." Do you agree with Dr. Hanson's statement there?
A. I would agree secondhand smoke could be associated with health in children.
Q. Would they be associated with asthma in children?
A. Yes.

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Q. And would secondhand smoke be associated with other respiratory problems in children?
A. It could.
Q. Well, do you believe that, sir?
A. What?
Q. Do you believe that?
A. Yes.
Q. Doctor, in the second column it says, "In addition, the association urged President Clinton and Congress to toughen any proposed agreement with the tobacco industry. At the very least, the doctors said, an agreement: Should not make the industry immune from damage suits." Do you agree with the Minnesota Medical Association's position?
MS. MARTIN: Objection. Foundation.
THE WITNESS I don't know if I can comment on it. I'm not aware of the statement before this time.
BY MR. KAYSER:
Q. Do you believe the cigarette industry should be immune from damage suits for injuries caused by cigarette products, sir?
MS. MARTIN: Objection. Foundation.
THE WITNESS: In general, no.
BY MR. KAYSER:

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Q. So is it your view that cigarette companies should be -- that people should be able to sue cigarette companies for damages caused by cigarettes?
A. Just as anybody can sue anybody.
Q. Let's stick with cigarette companies.
A. Yes.
Q. Do you believe cigarette companies should be able to be sued for damages caused by their products?
A. I would agree that they should be able to be sued.
Q. So they should not be immune from being sued, should they?
A. No.
Q. The Minnesota Medical Association also believes that any settlement with the tobacco industry, payment should be high enough to pay for any past or continuing harm from tobacco. Do you agree with that statement, sir?
MS. MARTIN: Where are you, Counsel?
MR. KAYSER: Middle of the page there.
BY MR. KAYSER:
Q. Let's ask that question again. Do you believe in the -- do you agree with the policy statement of the Minnesota Medical Association that tobacco industry payments should be high enough to pay for

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all past and continuing harm from tobacco that relates to the settlement that's presently before Congress and the President?

MS. MARTIN: Objection. Foundation.

THE WITNESS: I don't know if I have enough information to comment one way or another.

BY MR. KAYSER:

Q. Do you agree with the next paragraph where the Minnesota Medical Association believes that as part of any settlement there should be tough restrictions against marketing to children?

A. I would agree with that.

Q. Do you also agree, Doctor, with the policy of the Minnesota Medical Association that in any settlement, it should allow states to have laws tougher than those of the federal government?

A. I don't think I can comment on that. I don't know about the legislation in the state.

Q. Doctor, do you agree with the policy of the Minnesota Medical Association that any settlement should provide for a large industry-funded program to discourage tobacco use by children?

A. I wouldn't disagree with that.

Q. Would you agree with it?

A. Yes.

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Q. Doctor, do you know what the Minnesota Medical Association's position is with respect to the lawsuit by the State of Minnesota and Blue Cross Blue Shield --
A. No.
Q. -- in this litigation against the tobacco companies?
A. No.
Q. Do you know whether the Minnesota Medical Association supports this litigation against the tobacco companies?
A. No.
Q. Do you support the lawsuits against the tobacco companies in this litigation as a physician practicing medicine in the City of St. Paul since 1974?
Doctor, do you support the position of the State of Minnesota and Blue Cross Blue Shield against the tobacco companies in this litigation?
MS. MARTIN: Objection. Form and foundation.
THE WITNESS: I don't think I have that background information to be able to answer that question directly.
BY MR. KAYSER:

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Q. Have you read the amended complaint in this matter, Doctor?
A. It if I did it was sometime ago.
Q. As you sit here today do you have any recollection of reading the amended complaint in this matter, Doctor?
A. Off the record?
MR. KAYSER: Yes, we can go off the record.
(Discussion held off the record.)
THE WITNESS: No, I know, I haven't.
BY MR. KAYSER:
Q. Let me ask a question first. Have you read the amended complaint in this action, Doctor?
A. No.
MR. KAYSER: Let's mark this please.
(Plaintiffs' Deposition Exhibit No. 3352 - Business Week article - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you what has been marked as Plaintiffs' Exhibit 3352 which is an article from Business Week within the last couple of weeks. Have you read that article before today, sir?
A. No.
Q. Have you read in the newspaper about the

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California study of secondhand smoke, Doctor?
A. No.
Q. I believe you've already agreed with me that secondhand smoke is a health hazard to non-smokers; isn't that right, sir?
A. I would agree to that.
Q. On the second page of Exhibit 3352 it talks about the toll of secondhand smoke, Doctor. Do you see the little box in there?
A. Yes.
Q. Are you able to agree or disagree with anything in that box, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't have any data one way or the other to comment on this. This is the first time I've seen this.
BY MR. KAYSER:
Q. Do you believe, Doctor, that secondhand smoke is a cause of lung cancer?
A. I think it's associated with lung cancer.
Q. Do you agree, Doctor, that secondhand smoke causes heart disease?
A. I believe that there is an association.
Q. Between secondhand smoke and heart disease?
A. Yes.

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Q. Do you believe that secondhand smoke causes -- may be a cause of sudden infant death syndrome?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I have no information of that one.
BY MR. KAYSER:
Q. I'm sorry?
A. I don't know.
Q. Do you believe that secondhand smoke is associated with sudden infant death syndrome?
A. I don't know.
Q. Do you believe that secondhand smoke may be a cause of low birth weight babies?
MS. MARTIN: Objection. Foundation.
THE WITNESS: Other than what I have in front of me, I have no data one way or the other.
BY MR. KAYSER:
Q. Do you believe that secondhand smoke is a cause of asthma in children, Doctor?
A. I think it could be associated with asthma.
Q. In children?
A. Yes.
Q. And secondhand smoke is associated with asthma in children, Doctor?
A. Yes.

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Q. Do you believe that secondhand smoke causes bronchitis in children, Doctor?
A. It may be associated with bronchitis in children, yes.
Q. So it's your belief that secondhand smoke is associated with bronchitis in children, Doctor?
A. Yes.
Q. Would you agree, Doctor, that secondhand smoke aggravates asthma in adults?
A. It's my understanding, yes.
MR. KAYSER: Would you mark this?
(Plaintiffs' Deposition Exhibit No. 3353 - Smoke Free 2000 Coalition document - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you what has been marked as Exhibit 3353 which is on the letterhead of Smoke Free 2000 Coalition. Do you see that?
A. Yes.
Q. I'd like to have you drop down to the bottom of that. First of all, do you know Sue Zuidema?
A. No.
Q. Doctor, I'd like to have you just read the sponsoring board member organizations of Minnesota Coalition for a Smoke Free Society 2000. Just review those please.

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A. Out loud?
Q. No, just to yourself.
A. All right.
Q. Doctor, at the bottom of Plaintiffs' Exhibit 3353 they list the sponsoring board member organizations and you'll notice the Minnesota Medical Association is a part of that coalition; isn't that right, sir?
A. It appears to.
Q. You've read all the other organizations and there are maybe a dozen or so; isn't that right?
A. At least.
Q. Are all of the organizations reputable organizations to the best of your knowledge and belief?
MS. MARTIN: Objection. Foundation.
THE WITNESS: It's my assumption they are.
BY MR. KAYSER:
Q. Are there any sponsoring board member organizations of the Minnesota Coalition for a Smoke Free Society 2000 listed on Exhibit 3353 that you believe are not reputable organizations?
A. Not that I can see.
Q. Doctor, would you turn the page? The middle of

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the page, second paragraph do you see where it says, "When the tobacco companies are spending millions of dollars targeting our state's youth, we need to counter that with education and information to discourage them from taking that first step towards addiction." Do you agree with that statement, Doctor?
MS. MARTIN: Objection. Foundation. Form.
THE WITNESS: In general I would feel that we should encourage children not to smoke, yes.
BY MR. KAYSER:
Q. Do you agree with that statement I just read, Doctor?
A. I think it's difficult for me to take this out -- read it for the first time and comment about it.
Q. Just as a physician practicing medicine since 1974 and a father of two children and an adult would you agree with that statement, Doctor?
MS. MARTIN: Object to foundation with respect to the entire sentence he's asking.
THE WITNESS: I don't think I have the information to comment on what the tobacco industry is spending in terms of dollars, targeting Minnesota's youth.

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In general I would encourage my children and any child not to smoke.
BY MR. KAYSER:
Q. For health reasons, Doctor?
A. Yes.
Q. Well, do you think that the folks that make up Smoke Free 2000 Coalition would lie about that, Doctor, in the second page?
A. I would assume they would not.
Q. You would assume they're telling the truth?
A. That's an assumption, yes.
Q. Do you see where it says, "Most smokers begin smoking between the ages of fifteen and eighteen and are addicted by the age of eighteen?"
A. Yes.
Q. Do you agree with that statement, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't have any data to answer that.
BY MR. KAYSER:
Q. Speaking from your own experience as a physician practicing medicine in the City of St. Paul since 1974 and just your general knowledge as an adult would you agree most smokers who begin smoking between the ages of fifteen and eighteen are addicted

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by the age of eighteen?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't have any data one way or the other.
BY MR. KAYSER:
Q. Does it refresh you're recollection where it says, "The tobacco companies are going after those kids?"
A. What about it?
Q. Do you agree with that statement, Doctor?
A. I have no data to support or disagree with that.
Q. If it's true that tobacco companies are going after those kids between fifteen and eighteen would you consider that to be reprehensible conduct on the part of the tobacco companies, Doctor?
MS. MARTIN: Objection. Calls for speculation.
THE WITNESS: Maybe you could restate the question.
BY MR. KAYSER:
Q. If it is true that the tobacco companies are going after the kids between the ages of fifteen and eighteen would you consider that reprehensible conduct on the part of the cigarette manufacturers, Doctor?

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MS. MARTIN: Same objection.
THE WITNESS: I would have to agree with that.
BY MR. KAYSER:
Q. So your answer is yes?
A. Yes.
Q. It would be reprehensible conduct; is that right?
A. Yes.
Q. You have to answer out loud.
A. I'm sorry. Yes.
MR. KAYSER: Would you mark this?
(Plaintiffs' Deposition Exhibit No. 3354 - MMA Legislative Alert - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you Plaintiffs' Exhibit 3354, Doctor, which is a Legislative Alert on the letterhead of the Minnesota Medical Association. Do you have that, Doctor?
A. Yes.
Q. Do you have any reason to doubt that this comes from the Minnesota Medical Association, Doctor?
A. No.
Q. Do you receive these Legislative Alerts from time to time, Doctor, from the Minnesota Medical

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Association?
A. I believe so.
Q. And you understand that these Legislative Alerts state the policy and position of the Minnesota A. Medical Association at any given time?
A. They should.
Q. Doctor, in this particular exhibit, that is 3354, as you can see, the Minnesota Medical Association is supporting an increase in the tax on cigarettes; is that right, sir?
A. That's what it appears to be doing, yes.
Q. And I believe you told me before you would support such a tax increase; is that right, sir?
A. I believe I did.
Q. Now, down on talking points at the bottom of the page it says, "Smoking costs Minnesota taxpayers over one billion dollars in 1994." Do you have any reason to doubt that statement by the Minnesota Medical Association, Doctor?

MS. MARTIN: Objection. Foundation.

THE WITNESS: I have no personal information that would support or back it or disagree with it.

BY MR. KAYSER:
Q. Now, the purpose of this Legislative Alert is to

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get members of the Minnesota Medical Association to write their individual legislators to what is in a legislative report; is that right, sir?
A. I would presume so.
Q. Have you ever used a legislative report and written a legislator about the subject of --
A. No.
Q. Not even on the subject of the medical malpractice?
A. No.
Q. Do you think the Minnesota Medical Association would lie in a Legislative Alert like this, Doctor?
A. I would hope not.
Q. Do you assume the people who send out the Minnesota Medical Association Legislative Alerts are honorable men and women?
A. I would hope so.
Q. Do you assume they are dues' paying members?
A. I would hope so.
Q. Do you assume they are?
A. I'm making that assumption.
Q. So if the Minnesota Medical Association in a Legislative Alert in passing hope says that smoking costs Minnesota taxpayers over one billion dollars in 1994 would you have any reason to dispute that?

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MS. MARTIN: Objection. Foundation.
THE WITNESS: I have no idea how they derived at that and I have no way of knowing whether that's correct or incorrect.
BY MR. KAYSER:
Q. Would you assume the Minnesota Medical Association of this legislative alert would be telling the truth?
A. I would hope they would.
Q. Do you see where at the bottom it says, "Smoking kills four hundred thirty-five thousand Americans each year, more than alcohol, heroin, crack, car and plane accidents, homicides, fires, suicides and AIDS combined?" Do you have any reason to doubt the accuracy of that statement, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't know how they arrived at the numbers so it's hard to comment about it.
BY MR. KAYSER:
Q. Do you think the Minnesota Medical Association would lie in a memo of this nature that they hope Minnesota legislators would pass on to the members of state senators and --
MS. MARTIN: Objection. Asked and

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answered three times.
THE WITNESS: I would hope not.
MR. KAYSER: Would you mark this please?
(Plaintiffs' Deposition Exhibit No. 3355 - MMA Legislative Alert - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you what has been marked as Plaintiffs' Exhibit 3355 --
A. Yes.
Q. -- which is another legislative alert dated January 19, 1996. Do you see that, sir?
A. Yes.
Q. And again, this is the kind of Legislative Alert that you would receive from time to time?
A. Yes.
Q. And in this particular bill they are talking about legislation with respect to preemption. Do you see that, sir?
MS. MARTIN: Did you say preemption, Counsel?
THE WITNESS: On the second paragraph?
BY MR. KAYSER:
Q. Yes.
A. Yes.

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Q. Do you understand what the issue of preemption in the context of Plaintiffs' Exhibit 3355 is, Doctor?
A. I'm not sure. Maybe you could explain it.
Q. Why don't you read it and then we will talk about it.
A. Okay.
Q. Do you understand the issue of preemption as set forth in Plaintiffs' Exhibit 3355, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I think so, but it probably should be -- if you would explain it better.
BY MR. KAYSER:
Q. At the risk of having somebody objected to it, what this appears to me to be saying, and I think I'm accurate -- well, I know I'm accurate, is that the tobacco lobby and the retail lobby in the State of Minnesota do not want local cities and towns to pass ordinances restricting tobacco sales that are stronger than the state law. Do you understand that?
A. Yes.
Q. And what this bill or what this Legislative Alert is saying, 3355, is that the individual cities and towns in Minnesota ought be able to pass ordinances with respect to restricting tobacco sales

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that are stronger than state laws. Do you understand that?
A. Yes.
Q. Do you believe that the cities and towns in the State of Minnesota ought be able to pass ordinances restricting cigarette sales that are stronger than the state law?
A. I think if that's -- I don't have a problem with that if that's within their legal rights.
Q. Would you support allowing cities and towns in the State of Minnesota to pass whatever ordinances they feel are necessary to restrict cigarette sales and those ordinances may be stronger than the state law?
A. I guess I don't have a problem with that. Yes.
BY MR. KAYSER:
Q. So your answer is yes?
A. Yes.
Q. Would you support the local licensing of all tobacco vendors as set forth in paragraph 2, numbered paragraph 2, which is the MMA position?
MS. MARTIN: Objection. Foundation.
BY MR. KAYSER:
Q. Why don't I start over again. Do you see where I'm pointing to, Doctor?

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A. Yes.
Q. The Minnesota Medical Association position is on to support a local licensing of all tobacco vendors. Do you support that portion, Doctor?
A. I guess I don't have an opinion one way or the other on local licensing.
Q. Doctor, if the local licensing of tobacco vendors would help prevent the sale of cigarette products to minors would you support that?
A. I wouldn't have a problem with it.
Q. Is your answer yes?
A. Would you --
Q. Doctor, if local -- if the local licensing of tobacco vendors in the State of Minnesota would help prevent the sales of cigarettes to minors would you support that?
MS. MARTIN: Object to the form. Calls for speculation.
THE WITNESS: With that assumption, yes.
BY MR. KAYSER:
Q. Doctor, you see number 3 there?
A. Yes.
Q. The Minnesota Medical Association's matter of policy supports the annual compliance checks of all

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tobacco vendors. Do you support the Minnesota Medical Association's position there?
A. I'm not sure what the annual compliance checks are.
Q. Part of it is to send underage -- that is minors in to stores to buy cigarettes to make sure that tobacco vendors are complying with the law not to sell to underage children.
Would you support that as a way of preventing under age children from buying cigarettes?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I'm not sure. Is that entrapment?
BY MR. KAYSER:
Q. Doctor, as you read paragraph number 3 the Minnesota Medical Association's statement of policy supports annual compliance checks of all tobacco vendors. Do you see that?
A. I do.
Q. And you support that, Doctor?
MS. MARTIN: Objection. Asked and answered.
THE WITNESS: If I think that involves entrapment, no.
BY MR. KAYSER:

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Q. And you believe it constitutes entrapment, Doctor?
A. I don't know how that's defined by Minnesota's statute.
MR. KAYSER: Would you mark this please?
(Plaintiffs' Deposition Exhibit No. 3356 - Health Partners article - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you what has been marked as Plaintiffs' Exhibit 3356 in this matter. Have you seen this document before today?
A. No.
Q. Have you seen this publication in general before today, if not necessarily this specific issue?
A. No.
Q. Are you familiar with Health Partners?
A. Yes.
Q. What is Health Partners?
A. Health Partners is a combination of health providers and an insurance company.
Q. Is it an HMO?
A. I think it's more than just an HMO.
Q. Explain that for me, would you please?
A. I think they have an indemnity policy as well as

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HMO policy also. It's the combination of the old MedCenter medical program and Group Health which is an HMO.
Q. Now, you're a part of Allina; is that correct, sir?
A. That's correct.
Q. Are Health Partners and Allina similar?
MS. MARTIN: Objection. Foundation.
THE WITNESS: Allina probably could not be defined as a true HMO.
BY MR. KAYSER:
Q. Are there similarities between Allina and Health Partners?
A. I think they're similar in that they have combinations of insurance programs, physicians and hospitals that are owned.
Q. Are there -- what are the important differences in your mind between Allina and Health Partners?
A. Allina has a more open policy in terms of their insurance policy and is where their enrollees can go as opposed to the Group Health part of MedCenter which is probably a closed enrollment.
Q. Health Partners generally has a group of doctors and patients come and see those doctors, is that right, who are members of Health Partners?

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A. In general, yes.
Q. And Allina has another group of doctors and patients who come see those doctors; is that right, sir?
A. In general, yes.
Q. I recognize that's simply an indication, but just in general.
A. In general.
Q. Do you consider Health Partners to be a reputable organization, sir?
A. Yes.
Q. Does Allina have a publication -- strike that. Have you seen a publication from Allina that discourages people from using cigarettes and other tobacco products?
A. I can't recall offhand.
Q. Let's start with the first page. You've already turned to the first page. Do you see in the first paragraph where it says, "Every day about three thousand American teenagers become regular smokers, Doctor?"
A. Yes.
Q. Have you read figures similar to that over the years from time to time in newspapers and other medical magazines?

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A. I may have, but I don't recall offhand.
Q. Drop down to where it says, "Nicotine is a highly addictive drug and is being peddled to children." Do you believe nicotine is a highly addictive drug?
MS. MARTIN: Objection. Form and foundation.
THE WITNESS: You would have to define it better for me.
BY MR. KAYSER:
Q. Well, Doctor, this exhibit, 3356 is put out by Health Partners which is an organization which you consider reputable.
I note that on the medical editorial board on the left-hand side of the page there are a number of physicians. Do you know any of those physicians?
A. No.
Q. Let's go back to where it says, "Nicotine is a highly addictive drug." Do you think Health Partners would lie about that, Doctor?
A. I would assume that they would not lie.
Q. Drop down where it says, "Nearly ninety percent of smokers begin using tobacco by the time they're eighteen." Do you see that, Doctor?
A. Yes.

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Q. Do you agree with that, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't have any data to make a comment about that.
BY MR. KAYSER:
Q. Do you believe Health Partners would lie about that?
A. I would hope not.
Q. Do you think they would though?
A. I would hope not.
Q. Because Health Partners is a reputable organization; is that right?
A. That's my understanding.
Q. Do you have any reason to doubt that Health Partners is a reputable organization?
A. No.
Q. Do you see where it says, "Sixty-three percent of teen smokers consider themselves to be addicted." Do you see that, Doctor?
A. Yes.
Q. Do you agree with that statement, Doctor?
MS. MARTIN: Objection.
THE WITNESS: I have no way of commenting on that.
BY MR. KAYSER:

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Q. Do you think Health Partners would lie about something like that?
A. I would hope not.
Q. Do you think they would?
A. I wouldn't think so.
Q. Drop down to the second from the bottom there. Do you see where it says, "Six year old children are as familiar with Joe Camel - a cartoon figure that promotes Camel cigarettes - as they are with Mickey Mouse." Do you see that?
A. Yes.
Q. Have you read that statement or words similar to that effect before you came here today?
A. No.
Q. You've never seen that or heard that Joe Camel is as familiar to young children as Mickey Mouse is before today?
MS. MARTIN: Objection. Asked and answered.
THE WITNESS: I don't think I've ever read or recall reading where six year old children are as familiar with Joe Camel as they are with Mickey Mouse.
BY MR. KAYSER:
Q. Let's take it away from six year olds and talk

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about children in general any place between six to twelve. Have you read before you came to this deposition that children in that age group are as familiar if not more familiar with Joe Camel than they are Mickey Mouse?
A. I have not read it any place.
Q. Have you heard it on the radio or TV?
A. I may have heard it on the radio.
Q. Well, Doctor, if it's true that children between the ages of six and twelve are as familiar or more familiar with Joe Camel as they are with Mickey Mouse would that concern you from the standpoint of the cigarette companies marketing to children?
MS. MARTIN: Objection. Calls for speculation.
THE WITNESS: That's speculation and I don't know if I can answer that question.
BY MR. KAYSER:
Q. Do you have any grandchildren, Doctor?
A. No.
Q. Doctor, the last paragraph on the left-hand side of the page says, "Our children are getting hooked on an addictive product that is guaranteed to increase their risk for lung cancer, breast cancer, heart disease, stroke periodontal, disease emphysema and

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more." Do you grow with that sentence, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't know how they derive at the data. It's hard for me to comment.
BY MR. KAYSER:
Q. Do you think the physicians that are part of Health Partners would lie about something like that?
A. I would hope not.
Q. Do you think they would?
A. I don't think so.
MR. KAYSER: Do you want to take a break?
(Recess taken.)
BY MR. KAYSER:
Q. Doctor, we're still talking about Exhibit 3356. Let's turn to page 3. Would you as a general proposition agree with the headline that we should, "Urge our elected officials to protect kids from tobacco?"
MS. MARTIN: Object to form.
THE WITNESS: I would have a hard time not agreeing with that.
BY MR. KAYSER:
Q. So you would agree with it, wouldn't you?
A. Yeah.

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Q. And dropping down to the let hand column there, Doctor, what Health Partners is talking about in that left-hand column, second paragraph, is they're advocating a federal ban on advertising and promotion. Do you see that a federal ban on federal advertising and a promotion?
A. I would not disagree with that.
Q. Would you agree with it?
A. Yes.
Q. Have you contacted your local senators to support your ban on federal ban on advertising and promotion?
A. No.
Q. Over to the next page, Doctor, page 4. It's entitled in headline, Here's how tobacco harms your body. Do you see that --
A. Yes.
Q. -- In Exhibit 3356, Doctor?
A. Yes.
Q. Do you agree with the first paragraph there, Doctor, where it says Cigarette smoking increases risk for lung cancer, breast cancer, heart disease, stroke, periodontal disease, emphysema and more?
A. Yes.
Q. Drop down, Doctor, where it says smoke brings

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more than four thousand substances into your body?
A. Yes.
Q. And do you agree with that in the things listed there?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't think I have any way of commenting on that. I don't have the data.
BY MR. KAYSER:
Q. Do you think Health Partners would lie about that?
A. I would hope not.
Q. Do you think they would, sir?
A. I doubt it.
Q. And when Health Partners go on to say more than four hundred of those four thousand substances are known toxins do you agree with that, sir?
A. I have no way of commenting.
Q. Do you think Health Partners would lie about that?
A. I have no idea.
Q. Do you think they would, sir?
A. I don't think so.
Q. It says "Forty-three of these known chemicals are known to cause cancer." Do you agree with that, Doctor?

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A. I have no way of knowing that.
Q. Do you think Health Partners would lie about that, sir?
A. I don't know. I don't think so.
Q. Do you see where Health Partners says many others of the substances are known to cause stroke, heart disease, lung disease and addiction. Do you agree with that, sir?
MS. MARTIN: Objection. Foundation.
THE WITNESS: There is no way of my commenting about this.
BY MR. KAYSER:
Q. Do you think Health Partners would lie about this?
A. I think that they would not, certainly associations.
Q. Health Partners wouldn't lie about that, would they, sir?
A. As far as I know, no.
Q. Do you see where it says smoking damages your heart?
A. Yes.
Q. Do you agree with that, sir?
A. There is a potential.
Q. In what way, sir?

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Source: www.tobaccoindustrydocuments.ucsf.edu/docs/hnxd0001

A. There is an association between smoking and heart disease.
Q. When Health Partners says smoking damages your heart do you think Health Partners would lie about that, sir?
A. I would hope not.
Q. Do you think they would, sir?
A. No.
Q. Just below where it says smoking damages your heart it says the nicotine in tobacco increases your heart rate and blood pressure. Do you agree with that, Doctor, as a physician who has been practicing medicine in St. Paul since 1974?
MS. MARTIN: Objection. Foundation.
THE WITNESS: That's my understanding.
BY MR. KAYSER:
Q. The next sentence it says, "Carbon monoxide - the same gas in car exhaust and faulty furnaces that is deadly in enclosed spaces - reduces the amount of oxygen in your blood." Do you see that?
A. Yes.
Q. Do you agree with that, Doctor?
A. I would agree with that.
Q. And because carbon monoxide reduces the amount of oxygen to the blood, the article goes on to say

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that it means that a heart isn't getting the oxygen it needs to work effectively. Do you agree with that, Doctor?
A. I think that's the assumption.
Q. Would you agree with it, Doctor?
A. Yes.
Q. Would you also agree, Doctor, that carbon monoxide also makes the arteries in arms and legs constrict?
A. In your arms and legs?
Q. Yes.
A. I don't think I can comment on that. I don't know.
Q. Do you think Health Partners would lie about that, Doctor?
A. I would hope not.
Q. Do you think they would, Doctor?
A. No. As far as I know, no.
Q. And then in the next column, Doctor, do you see where it says that smoking has other bad effects on your heart and arteries. Do you see that?
A. Yes.
Q. The article goes on to say that smoking reduces the ratio of good HCL cholesterol to the bad LDL cholesterol which leads to plaque formation in blood

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vessels. Do you see that?
A. Yes.
Q. Do you agree with that statement, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I think I agree there is an association between smoking and HDL levels and LDL levels being altered.
BY MR. KAYSER:
Q. So you agree with the basic premise of the first part of the paragraph that smoking reduces the ratio of good HDL cholesterol to bad LDL cholesterol?
MS. MARTIN: Objection. Asked and answered.
THE WITNESS: That's my understanding.
BY MR. KAYSER:
Q. And when that ratio is reduced plaque formation builds up in blood vessels; isn't that right, sir?
A. That's the general belief.
Q. Do you believe it, sir?
A. Yes.
Q. And when plaque builds up in blood vessels the coronary vessels narrow and there is less blood and oxygen and other nutrients that reach a person's heart; isn't that right, Doctor?

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A. Potentially, yes.
Q. Isn't that what happens, Doctor?
A. It can.
Q. That's serious, isn't it, Doctor; it's a serious health hazard?
A. It could be.
Q. People take medicine to reduce plaque in the blood vessels, don't they, Doctor?
A. Yes.
Q. And do you agree that symptoms may include chest pain and shortness of breath, Doctor?
MS. MARTIN: Object to the form.
THE WITNESS: Symptoms of --
BY MR. KAYSER:
Q. Build-up of plaque in the coronary vessels.
A. It's possible, yes.
Q. Isn't that one of the possibilities, Doctor; a person may have chest pain and shortness of breath?
A. It could.
Q. And the next paragraph, Doctor, it says that smoking also increases the tendency for blood to clot. Do you agree with that, Doctor?
A. I don't think I can answer that directly.
MS. MARTIN: Objection. Foundation.
BY MR. KAYSER:

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Q. Why not?
A. I don't know.
Q. Do you think Health Partners would lie about that, Doctor?
A. I would hope not.
Q. Do you think they would?
A. No.
Q. And the article goes on to say when blood clots form in your vessels blood flow is blocked. Do you agree with that, Doctor?
A. Yes.
Q. And the article goes on to say, "If the flow in the coronary vessel is completely cut off, part of the heart muscle dies - a condition we commonly call heart attack." Do you agree with that, Doctor?
A. Yes.
Q. And then the article goes on to say, "If the blockage is extensive, the whole heart may become damaged and stop pumping. If that happens, you die." Do you agree with that, Doctor?
A. They could.
Q. If the heart stops pumping a person will die is that correct?
A. That's correct.
Q. And all that is a possibility of coming from

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smoke; isn't that right, Doctor?
A. It's possible.
Q. You know that's a strong possibility, don't you, Doctor?
A. It's certainly possible.
Q. It's one of the associations of smoking, isn't it, Doctor?
A. It's an association with smoking.
Q. It goes down on the right-hand side column, the last paragraph of page 4 of Exhibit 3356, Doctor. Health Partners says that smoking is a major risk factor for heart disease. Do you agree with that, Doctor?
MS. MARTIN: Object to the form.
THE WITNESS: I don't know how they're defining major risk factor.
BY MR. KAYSER:
Q. This is being written by doctors, physicians and people at Health Partners, Doctor, so let's try it again.
Do you believe that smoking is a major risk factor for heart disease, Dr. Corbett?
MS. MARTIN: Object to form.
THE WITNESS: I don't think I can answer this as to what they mean by major. It is a

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risk factor.
BY MR. KAYSER:
Q. Do you think it's a major risk factor, Doctor?
MS. MARTIN: Objection. Asked and answered.
THE WITNESS: I don't think I can answer that any more specifically.
BY MR. KAYSER:
Q. Why not?
A. Because I don't think I can define how they're using the word major.
Q. Let's define major in your terms, Doctor.
A. It's one of the stated risks for smoking.
Q. Do you agree it's -- that heart disease is a risk of smoke, Doctor?
A. Yes.
Q. Well major is defined in this American Heritage Dictionary, Doctor, among other things greater importance rank or stature.
Would you say that smoking is a major risk factor that is greater in importance and rank than other risk factors with respect to heart disease?
A. I think there are other risk factors that are more important.
Q. Such as?

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A. Heredity.
Q. Let's talk about those risk factors over which we have control because we don't choose our parents presumably.
A. That wasn't the question, but --
Q. I understand that. For those risk factors over which we have control would you say that smoking is the major risk factor in heart disease?
A. It's what's stated, yes.
Q. Do you believe that?
A. Yes.
Q. Let's turn to page 57, Doctor, of Exhibit 3356, page 5. It says consider these facts. Do you see that?
A. Yes.
Q. Do you believe that smoking is a leading cause of preventable illness and death in the United States, Doctor?
A. I can't answer that directly. I don't have the data.
Q. What do you know from your experience as a physician practicing medicine since 1974 in St. Paul, Minnesota in someone who has to advise patients on an ongoing basis who come to you for advise and counsel someone who keeps up with the medical literature as a

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fine physician; would you agree, Doctor, that smoking is the leading cause of preventable illness and death in the United States?
MS. MARTIN: Objection. Foundation. The doctor is not an epidemiologist or statistician.
THE WITNESS: I don't have the data in terms of my own patients as to what the incidence of smoking related deaths are. I would advise my patients not to smoke.
BY MR. KAYSER:
Q. Have you found in your patients, Doctor, that smoking is the leading cause of preventable illness in your patients?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I have not done a study to show one way or another.
BY MR. KAYSER:
Q. Just over the experience you've had in the City of St. Paul as a practicing physician since 1974 and your general knowledge discussing with other doctors, Dr. Corbett, would you agree that smoking is the leading cause of preventable illness among your patients?
A. I think that would be speculation.
Q. Let's drop down to the next paragraph, Doctor.

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It says, Cigarette smokers have at least twice the risk for developing cardiovascular disease as non-smokers. Do you agree with that?
A. I have no data to make a comment one way or the other as to the statistics.
Q. Doctor, taking your own experience as a physician in the City of St. Paul since 1974 in practicing medicine and advising patients have you found that your patients who are cigarette smokers have a greater risk for developing cardiovascular disease than your non-smoking patients?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I have done no study that would lead me one way or the other.
BY MR. KAYSER:
Q. Doctor, the next paragraph on page 5, Exhibit 3356 says that smoking triples the risk of death from heart disease. Do you see that, Doctor?
A. Not right offhand. Oh, yes.
Q. Do you agree with that, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I have no data one way or the other to support or disagree with it.
BY MR. KAYSER:
Q. Doctor, based on your experience as a physician

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in the City of St. Paul since 1974 and a physician who treats patients, advises patients, and whose patients rely on you for counseling and advice do you believe that smoking increases your patients risk of death from heart diseases?
A. I think it increases the risk of heart disease.
Q. Heart disease, Doctor?
A. Yes.
Q. So would it increase the risk of -- would smoking increase the risk of death from heart disease then?
MS. MARTIN: Object to form.
THE WITNESS: I don't have any data offhand to show what would be the result.
BY MR. KAYSER:
Q. People die from heart disease, don't they, Doctor?
A. They do.
Q. And so that if have you an increased risk of heart disease wouldn't you have an increased risk of dying from heart disease?
A. That would be the assumption.
Q. Do you believe that, sir?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't have any data,

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but --
BY MR. KAYSER:
Q. Let's talk about --
MS. MARTIN: Just a minute. Let the doctor finish his answer and then you can interrupt him.
MR. KAYSER: He did.
MS. MARTIN: No. He had something to say and you're not watching him.
THE WITNESS: I don't have data on my own patients.
BY MR. KAYSER:
Q. You don't have data on your own patients?
A. As to how they do when they start or stop smoking.
Q. Doctor, let's drop down to the last paragraph just before it says smoking damages your lungs. Do you see where it says that women who smoke and take oral contraceptives have an increased risk for heart disease and stroke?
A. That's my understanding.
Q. Do you agree with that statement, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: In general, yes.
BY MR. KAYSER:

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Q. Doctor, the next paragraph says, smoke damages your lungs. Do you agree with that, Doctor?
MS. MARTIN: Object to the form.
THE WITNESS: I don't know how they derived at this statement. In general I agree with it.
BY MR. KAYSER:
Q. You agree that smoking damages lungs?
A. In general.
Q. Why are you qualifying that, Doctor?
A. Because I'm not sure how -- I have not seen this article before. I'm not sure how the rest of this reads.
Q. Doctor, let's just take the general statement. You're a physician since 1974 and you advise patients. You're an internist; is that right?
A. That's correct.
Q. And you believe that smoking damages lungs, don't you?
A. The statement by itself, yes.
Q. Let's take the next paragraph there where it says smoking increases the chance of birth defects. Do you agree with that, sir?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't have the data

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one way or the other to support or disagree with it.
BY MR. KAYSER:
Q. You don't know the answer?
A. Correct.
Q. Take a look at the next page, Doctor, it has the tombstone that says RIP?
A. Yes.
Q. We're still talking about Exhibit 3356?
A. Yes.
Q. Left-hand column down towards the bottom. Do you see where it says, "Because nicotine is addictive?"
A. Yes.
Q. Do you believe that nicotine is addictive, Doctor?
MS. MARTIN: Object to the form. Foundation.
THE WITNESS: I believe people have difficulty stopping smoking.
BY MR. KAYSER:
Q. Are you differentiating that in your answer between people being addictive and people having trouble stopping smoking?
A. I guess I'd like to know how they're defining addictive.

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Q. This again is a publication written by Health Partners, Doctor.
A. I understand.
Q. And do you think that Health Partners would lie in a publication when it says smoking is addictive?
A. I think that term could be used in many ways, so I'm -- I don't know how they're defining this.
Q. Well, would you disagree that nicotine is addictive?
A. I think people who smoke frequently have difficulty stopping smoking.
Q. Does that equate in your mind with your definition of addictive, Doctor?
A. Yes, in general.
Q. Pardon?
A. Yes.
Q. Doctor, let's go over to page 8 of Exhibit 3356. Do you see where it says in bold print -- off the record.
(Discussion held off the record.)
BY MR. KAYSER:
Q. Do you see where it says, "Tobacco ads persuade kids to smoke?"
A. Yes.
Q. Does that refresh your recollection that, in

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fact, tobacco companies do aim their advertising at children?
MS. MARTIN: Object to the form and foundation.
THE WITNESS: I don't think I have any way of answering that question specifically.
BY MR. KAYSER:
Q. Well, Doctor, let's go to the last page of Plaintiffs' Exhibit 3356. On the left-hand side it says health benefits of stopping smoke. Do you see that?
A. Yes.
Q. Would you just read that to yourself on the left-hand column from top to bottom?
A. Okay.
Q. Doctor, you've finished reading the left-hand column of page 1 of Plaintiffs' Exhibit 3356?
A. Yes.
Q. And it shows a kind of time line, does it not, of the health benefits of stopping smoking starting from twenty minutes to fifteen years?
A. Yes.
Q. Do you agree with the items listed in that column, Doctor?
A. I don't --

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MS. MARTIN: Objection. Form and foundation.
THE WITNESS: I don't think I can comment about all of these.
BY MR. KAYSER:
Q. Is there any particular benefit listed from twenty minutes to fifteen years with which you disagree?
A. I don't think I can comment. I don't have the data on some of this.
Q. Then let's take -- do you agree with any of the items list in that time line from twenty minutes to fifteen years?
MS. MARTIN: Objection. Asked and answered.
MR. KAYSER: Different question, Counsel.
THE WITNESS: I think at the ten and fifteen year mark I would accept that.
BY MR. KAYSER:
Q. Do you disagree with the five year mark?
MS. MARTIN: Objection. Form and foundation.
THE WITNESS: I don't know. I don't know. I don't know that answer. I don't have the

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data.
BY MR. KAYSER:
Q. Do you think Health Partners would lie about that, sir?
A. I would hope not.
Q. Do you think they would?
A. I would hope not.
Q. Do you think they would, Doctor?
A. I don't think so.
Q. Do you think Health Partners would lie about anything else in this time line?
A. I would hope not.
Q. Do you think they would?
A. No.
MR. KAYSER: Would you mark this?
(Plaintiffs' Deposition Exhibit No. 3357 - AMA fact sheet - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you what has been marked as Plaintiffs' Exhibit 3357.
A. Yes.
Q. Do you see it purports to be an AMA, that is American Medical Association, fact sheet with respect to kids and smoking?
A. I see that.

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Q. Doctor, I'd like you to read that to yourself from beginning to end and tell me when you're finished. There is a second page on there too, Doctor.
A. I want to just slowly go through this. All right.
Q. Have you completed reading Plaintiffs' Exhibit 3357, Doctor?
A. I have.
Q. Would you agree with me that it's a fact sheet put out by the American Medical Association with respect to children and smoking?
A. I have no way of knowing that. That's what it says.
Q. Is there anything in Plaintiffs' Exhibit 3357 with which you disagree?
MS. MARTIN: Object to form and foundation.
THE WITNESS: Many --
MS. MARTIN: The question is broad.
THE WITNESS: Many of the statements I think would have to be questioned.
BY MR. KAYSER:
Q. Let's start at the beginning. Tell me the statements from the beginning with which you

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disagree.
In fact, why don't we do it this way to -- this is one of those times we will write on the exhibit.
Why don't we take one of those points with which there is an asterisk and just write from 1 through whatever it ends up being so we will be able to be on the same paragraph.
MR. KAYSER: Does that sound all right with you, Counsel?
MS. MARTIN: I'm not sure I understand the proposal.
THE WITNESS: He wants us to number the asterisk 1, 2, 3 4.
BY MR. KAYSER:
Q. With any luck we have all ended up with 13.
A. Yes.
Q. Have you?
A. I did.
Q. Let's start with paragraph 1. Do you agree or disagree with paragraph 1; every day three thousand children have their first cigarettes.
MS. MARTIN: I will object to the form and the foundation as with each question and indicate, Doctor, if you cannot agree or disagree you can say you don't know.

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MR. KAYSER: Are you coaching the witness, Counsel?
MS. MARTIN: I don't think I am. What do you think?
MR. KAYSER: Sounds like it.
BY MR. KAYSER:
Q. Paragraph 1, Doctor, do you agree or disagree with that?
A. I don't have any data to support this one way or the other. I don't know.
MS. MARTIN: That would be a DK for don't know then.
MR. KAYSER: I don't want you to write anything more. The record will be fine.
BY MR. KAYSER:
Q. Do you agree or disagree with paragraph 2, Doctor?
A. I don't know.
Q. Do you agree or disagree with paragraph 3, Doctor?
A. I don't know.
Q. Do you agree or disagree with paragraph 4, Doctor?
A. I have no idea about this one.
Q. Do you agree or disagree with paragraph 5,

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Doctor?
A. Tobacco use in adolescents associated with health compromising behaviors which is sexual behavior, carrying weapons, drinking, I don't know.
Q. Do you agree or disagree with paragraph 6, Doctor?
A. I don't know.
Q. Well, just based on your general knowledge, Doctor, as a person who has grown up or at least been practicing in the Twin Cities' community and somebody who is interested in health and interested in tobacco issues, are you aware the American cigarette companies have spent at least billions of dollars for cigarette advertising?
A. I have no idea how much they spent.
MS. MARTIN: Objection. Foundation.
BY MR. KAYSER:
Q. Paragraph 7, do you agree or disagree with paragraph, 7?
A. I have no way to comment on this.
Q. Do you agree or disagree with paragraph 8?
A. I have no data on this one.
Q. Do you agree or disagree with paragraph 9, Doctor?
A. 1986 to 1989 all high school seniors who smoke

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ninety percent were found to be tobacco users, I have no idea.
Q. Do you agree or disagree with paragraph 10?
A. I have no idea.
Q. Doctor, do you agree or disagree with paragraph 11?
A. I think smoking probably if avoided would result in a decrease in death.
Q. In the United States?
A. In the United States.
Q. Would you agree that smoking cigarettes is the leading cause of avoidable death in the United States?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I don't think I can answer that. I don't know.
BY MR. KAYSER:
Q. Would you agree, Doctor, based on your experience as a physician in the City of St. Paul since 1974, a person knowledgeable in medical matters, and someone upon whom your patients rely for counsel and advice that smoking cigarettes is the leading cause of avoidable death in the State of Minnesota?
MS. MARTIN: Same objection. Same

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objection on foundation. Also asked and answered.
THE WITNESS: I don't think I have any data on my patient population which would allow me to answer this.
BY MR. KAYSER:
Q. We did the United States before. We have now gone to the State of Minnesota. Doctor, let's take a look at paragraph 1. Do you agree or disagree with that?
A. I don't have any data to agree or disagree.
Q. Paragraph 13, Doctor, do you agree or disagree with that?
A. I don't have any data.
Q. To agree or disagree?
A. Yes.
MR. KAYSER: Would you mark this.
(Plaintiffs' Deposition Exhibit No. 3358 - deposition transcript excerpt - marked for identification.)
MR. KAYSER: Let's take a short break.
(Recess taken.)
BY MR. KAYSER:
Q. Doctor, earlier in this lawsuit a deposition was taken of an expert from the tobacco companies whose name was Dr. Christian Wunsch I believe his name was, and I can't remember how you spell it, but it was

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spelled correctly in my pre-designation of my documents.

I want to ask you some questions about his testimony. Doctor, showing what you the Court Reporter has marked Plaintiffs' Deposition Exhibit 3358 which is page 198 of Dr. Wunsch's deposition, I'd like to have you read that and tell me when you're through reading it.

A. All right.

Q. Have you read Plaintiffs' Exhibit 3358, Doctor?

A. Quickly.

Q. Would you -- first of all, are you familiar with what's known as ICD9 codes?

A. Yes.

Q. Would you briefly explain to us enough so we all understand what are ICD9 codes?

A. When people are hospitalized or put in nursing homes or come to the office they carry diagnosis. Those diagnosis are coded and these are the way they refer to the code numbers.

Q. Do you use ICD9 codes in your practice, Doctor?

A. I think we all use ICD9 codes in our practice. We have to bill.

Q. Is the answer yes?

A. Well, I don't code specifically. I don't sit

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and code my own charts, so --
Q. Perhaps --
A. I'm being a little bit vague here, but I think in general, yes, we use ICD codes. Do I do the coding, no.
Q. Does someone use ICD at your direction essentially?
A. I list diagnosis, somebody does the coding.
Q. Do you use those ICD9 codes in billing your patients?
A. I would assume, yes.
Q. Do you know that to be a fact?
A. No.
Q. Do you assume --
A. I would assume so.
Q. Do you consider the ICD9 codes reliable or unreliable?
MS. MARTIN: Object to the form of the question.
THE WITNESS: In terms of do we use ICD9 codes, I would for the most part consider them reliable.
BY MR. KAYSER:
Q. Line eighteen on Exhibit 3358, "It's a stupid-ass requirement that people have put on us to

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make our lives worse." Do you believe that about ICD9 codes?
A. Well, they're time consuming.
Q. Do you think ICD9 codes are "a stupid-ass requirement that people have put on us to make our lives worse?"
MS. MARTIN: Objection. Asked and answered.
THE WITNESS: I don't think they were done with that intent.
MR. KAYSER: Would you mark this please?
(Plaintiffs' Deposition Exhibit No. 3359 - deposition transcript excerpt - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing what you has been marked as Plaintiffs' Exhibit 3359 which is page 376 and 388 of the Wunsch deposition.
Why don't you just take a moment to read those two pages.
A. It's non-consecutive pages?
Q. Right.
A. All right.
Q. Doctor, have you now read the two pages that constitute Plaintiffs' Exhibit 3359?

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A. I have quickly.
Q. Now, you understand that both pages refer to heart disease and whether or not cessation of smoking would decrease heart disease throughout the country, don't you?
A. I do.
Q. Doctor, do you believe that if smoking is decreased in the United States the population incidence of heart disease would also be decreased?
MS. MARTIN: Objection. Form and foundation.
THE WITNESS: I think it's one of the behaviors which if decreased would help decrease the risk for heart disease.
BY MR. KAYSER:
Q. Well, Doctor, you have agreed I believe - and stop me if I'm wrong - that smoking is associated with heart disease; is that right?
A. I do.
Q. Pardon me?
A. Associated, yes.
Q. And to the extent that cigarette smoking is decreased do you agree that heart disease would decrease?
MS. MARTIN: Objection. Form and

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foundation. Asked and answered.
THE WITNESS: That's my assumption.
MR. KAYSER: Would you mark this please?
(Plaintiffs' Deposition Exhibit No. 3360 - deposition transcript excerpt - marked for identification.)
BY MR. KAYSER:
Q. Doctor, the Court Reporter has handed you Plaintiffs' Exhibit 3360 which is page 377 of the Wunsch deposition. Would you read that and let me know when have you finished reading, sir?
A. All right.
Q. Doctor, do you believe that smoking if decreased in the population of the United States that the incidence of lung cancer would also be decreased?
MS. MARTIN: Object to the form and foundation.
THE WITNESS: I would agree with that.
BY MR. KAYSER:
Q. The answer is yes?
A. Yes.
MR. KAYSER: Let's mark this.
(Plaintiffs' Deposition Exhibit No. 3361 - deposition transcript excerpt - marked for identification.)
BY MR. KAYSER:

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Q. Doctor, the Court Reporter has just handed you Plaintiffs' Exhibit 3361, pages 310 and 311 of the Wunsch deposition. Do you see that, Doctor?
A. Yes.
Q. Before you read that, Doctor, you have agreed with me I think in the previous deposition that epidemiology is a recognized respected science and medicine?
A. In general I believe I did.
Q. Would you read that, Doctor, Exhibit 3361?
A. Yes.
Q. Doctor, you've read the two pages that constitute Exhibit 3361; isn't that right, sir?
A. I did quickly.
Q. And the witness there is talking about epidemiology and epidemiologists; is that right, sir?
A. Yes.
Q. Do you believe that epidemiology provides a valuable function to the medical community?
A. I believe so.
Q. And the second page, that is page 311, lines 21 and 22 the witness talks about epidemiologists who interpret statistics lie?
MS. MARTIN: Object to the form of the question. It says people, it doesn't say

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epidemiology.
BY MR. KAYSER:
Q. We're talking about epidemiologists in this, aren't we, Doctor?
MS. MARTIN: We don't know what the doctor is referring to.
THE WITNESS: I think the document in general, at least these two pages, I don't know specifically what he's talking about in this answer.
BY MR. KAYSER:
Q. Do you believe that epidemiologists who interpret statistical results lie, Doctor?
MS. MARTIN: Object to form.
THE WITNESS: I would hope not.
BY MR. KAYSER:
Q. Is it your experience that epidemiologists who interpret statistical results lie?
MS. MARTIN: Object to form and foundation.
THE WITNESS: I think it's difficult sometimes to know how they're arriving at their conclusions.
BY MR. KAYSER:
Q. Do you believe that epidemiologists lie, Doctor?
A. I would hope not.

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Q. Tell me what your belief is based on your experience as a practicing physician in St. Paul since 1974, Doctor.

MS. MARTIN: Object. Overly broad. Form.

THE WITNESS: I don't think I can.

BY MR. KAYSER:

Q. Do you know of instances where you believe that you know epidemiologists have lied in their interpretation of statistical results?

A. I don't know if they lie. It's just sometimes hard to interpret.

MR. KAYSER: Let's mark this.

(Plaintiffs' Deposition Exhibit No. 3362 - deposition transcript excerpt - marked for identification.)

BY MR. KAYSER:

Q. Doctor, the Court Reporter has now handed you Plaintiffs' Exhibit 3362 which constitutes -- where it says two pages, that is 166 and 167 of the Wunsch deposition. Would you read that, sir, and let me know when you're done?

A. Okay.

Q. Have you read Plaintiffs' Exhibit 3362, Doctor, the two pages there?

A. Yes.

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Q. Doctor, do you believe that the American Lung Association is a reputable, professional organization?
A. I don't think it's a professional organization in the sense that say the American College of Physicians, the American College of Surgeons, the American Medical Association would be.
Q. Do you believe that the American Lung Association is a reputable organization, Doctor?
A. In general, yes.
Q. Well, do you agree with Dr. Wunsch that the American Lung Association is not a professional organization; it's composed of nice, little old ladies that need to find something to do for their community?
A. I think it's, as I stated above, not a professional organization in the sense that it's made up of both professionals and lay people.
Q. Do you believe the American Lung Association is a reputable organization, Doctor?
A. In general, yes.
Q. Would you agree with Dr. Wunsch that the American Lung Association is just made up of nice little old ladies that need to find something to do for their community?

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MS. MARTIN: I'll object to the form of the question in that it does misstate and take out of context the quote.
BY MR. KAYSER:
Q. Let me give you the whole quote. Do you believe the American Lung Association is not a professional organization, but one composed of nice, little old ladies that need to find something to do for their community in public-minded individuals as stated on page 167, Doctor? Would you want to be associated with those remarks, Doctor?
A. No.
Q. Doctor, let's go to the American Heart Association. Do you believe the American Heart Association is a reputable, professional association?
A. I believe so.
Q. Do you believe that the American Cancer Society is a reputable, professional organization, Doctor?
A. Again, I think both these organizations are reputable organizations, but they're not professional organizations in the sense that again the AMA, College of Physicians, College of Surgeons would be professionals in that they're made up of both professionals and lay persons.
Q. Would you like to be associated with Dr.

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Wunsch's remarks that the American Heart Association is composed of nice, little old ladies that need to find something to do as he sets forth in page 167?
A. It's a bit extreme.
Q. Would you like to be associated with that remark with respect to the American Heart Association?
A. No.
Q. Doctor, the American Cancer Society, would you find the American Cancer Society as a professional and reputable organization?
A. Would you restate that?
Q. Do you believe that the American Cancer Society is a professional and reputable organization?
MS. MARTIN: Objection. Asked and answered. You've done Heart and Cancer.
MR. KAYSER: We have done American Lung, American Heart and now we're --
BY MR. KAYSER:
Q. Let's go back to the basic question. Do you believe that the American Heart Association is a reputable organization?
A. Again, I think it's a reputable organization, but I don't believe it's a professional organization such as the American College of Physicians.
Q. Would you like to be associated with Dr.

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Wunsch's remarks on page 167 that they are not professional organizations and they're composed of nice, little old ladies that need to find something to do for their community in public-minded individuals?
A. I think that's a little extreme.
Q. Would you like to be associated with his remarks?
A. No.
MR. KAYSER: Let's mark this.
(Plaintiffs' Deposition Exhibit No. 3363 - deposition transcript excerpt - marked for identification.)
THE WITNESS: You asked me a question as to whether I would like to be associated with these comments by Dr. Wunsch, and I would just like to specify and make clear that I would not like to be associated with the specific comment.
BY MR. KAYSER:
Q. I understand. Do you have before you Exhibit 3362, Plaintiffs' Exhibit 3362.
A. Yes.
Q. Showing you what has been marked Plaintiffs' Exhibit 3363, Doctor. Mr. Goldstone is an executive with the R.J.R. Company. I think Counsel, Mr. Curtis, and I have agreed with that off the record.

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A. Okay.
Q. Mr. Goldstone once testified that he believed cigarette smoking is a cause of disease in humans. Do you agree that cigarette smoking is a cause of disease in humans, Doctor?
MS. MARTIN: Objection. Asked and answered. Form and foundation.
THE WITNESS: I think that it's associated with disease in human beings.
MR. KAYSER: Mark this please?
(Plaintiffs' Deposition Exhibit No. 3364 - deposition transcript excerpt - marked for identification.)
BY MR. KAYSER:
Q. Doctor, I'm showing you what has been marked as Plaintiffs' Exhibit 3364 which is page 469 of the Wunsch deposition. Would you read that please and tell me when you're done?
A. All right.
Q. Doctor, I'd like to direct your attention to Plaintiffs' Exhibit 3364, lines 2 through 6. "Question: Is it you're opinion that the interactions of the compounds in cigarette smoke may actually protect against cancer? Answer: May? The possibility, yes." Do you agree with that, Doctor?
A. I have no way of commenting about this. I have

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no idea what he is referring to here.
Q. Do you agree that the interactions of the compounds in cigarette smoke may actually protect against cancer?
A. I don't have any information one way or the other.
Q. So you think it's a possibility that the interactions of the compounds in cigarette smoke may actually protect against cancer; is that your testimony?
A. I have no way of commenting one way or the other. I don't have any data one way or the other on that.
Q. Have you ever heard any scientist or health care professional or any physician ever say that the interactions in the compounds of cigarette smoke may actually protect against cancer?
A. I haven't.
Q. Are you astonished that any physician would say that it's possible that the interactions of compounds in cigarette smoke may actually protect against cancer?
MS. MARTIN: Object to the form.
THE WITNESS: I don't think I can comment about his statement here. It's four lines

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out of an obviously many hundred page deposition.
BY MR. KAYSER:
Q. So as you sit here today, Doctor, as a practicing physician in St. Paul since 1974 you think it is probable based on your knowledge that the interactions of the compounds in cigarette smoke may actually protect against cancer?
MS. MARTIN: Objection. Asked and answered.
THE WITNESS: I don't think I can answer that any better than I already have. I don't know.
MR. KAYSER: Would you mark this for us please?
(Plaintiffs' Deposition Exhibit No. 3365 - deposition transcript excerpt - marked for identification.)
BY MR. KAYSER:
Q. Doctor, you have before you Plaintiffs' Exhibit 3365?
A. I do.
Q. Would you read that for me please, sir, and when you get done let me know.
A. All right.
Q. Doctor, I'd like to direct your attention specifically on Exhibit 3365 to lines 11 through 14.

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Dr. Wunsch says -- the question asks if smoking is still a net cost to the Medicaid program in Minnesota. Do you see that, Doctor?
MS. MARTIN: Object to the form of the question.
THE WITNESS: Lines 10 through 15?
BY MR. KAYSER:
Q. Right.
A. I see that, yes.
Q. Do you agree that smoking is still a net cost to the Medicaid program in Minnesota, Doctor?
MS. MARTIN: Objection. Foundation.
THE WITNESS: I have no data to comment on that one way or another.
BY MR. KAYSER:
Q. Doctor, if one of your patients comes to you and ask you whether cigarette smoking causes cancer what are you going to tell him or her?
MS. MARTIN: Object to the form of the question. Calls for speculation.
THE WITNESS: I would tell them that I think that smoking is not a good idea, that there is an association between smoking and disease, and I would advise him or her not to.
BY MR. KAYSER:

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Q. That ends your answer, Doctor?
A. That's it.
Q. When a patient comes to you, Doctor, and asks you what diseases are caused by smoking what will you tell that person?
MS. MARTIN: Same objection.
THE WITNESS: I would tell him there is an association between smoking and lung cancer, emphysema, heart disease.
BY MR. KAYSER:
Q. Stroke?
A. Possibly stroke.
Q. Laryngeal cancer?
A. That's an increased risk.
Q. Cancer of the esophagus?
A. That's an increased risk.
Q. Pancreatic cancer?
A. There is an increased risk.
Q. Bladder cancer?
A. That's questionable.
Q. Really?
A. Yes.
Q. Doctor, would you agree that the tobacco companies are really selling death and disease in selling their tobacco products?

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MS. MARTIN: Object to form and foundation.
THE WITNESS: I think that smoking is unhealthy.
BY MR. KAYSER:
Q. Do you think the cigarette companies are selling death and disease when they're selling their products to the residents of the State of Minnesota?
MS. MARTIN: Objection. Asked and answered.
THE WITNESS: I don't think I can answer that question.
BY MR. KAYSER:
Q. Why not?
A. Because I don't know what their intent is.
Q. Do you think that the effect of the selling of cigarettes in the State of Minnesota is to sell death and disease in the State of Minnesota?
MS. MARTIN: Objection to the form and foundation.
THE WITNESS: I think that it's unhealthy to smoke.
MR. KAYSER: No further questions.
MS. MARTIN: Dr. Corbett, you have a right to read and sign your deposition transcript

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once it's prepared by the Court Reporter.
You need to indicate that on the record whether you will accept that right or waive that right.

THE WITNESS: I'll accept it.
MS. MARTIN: Thank you.

(Time: 5:02 p.m.)

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C E R T I F I C A T E

I, NANCY K. JOHNS, hereby certify that I am qualified as a verbatim shorthand reporter; that I took in stenographic shorthand the testimony of VICTOR CORBETT, M.D., at the time and place aforesaid; and that the foregoing transcript consisting of pages 176 through 330 is a true and correct, full and complete transcription of said shorthand notes, to the best of my ability.

Dated at Minneapolis, Minnesota, this 30th day of September, 1997.

_____

Nancy K. Johns, Notary Public
Hennepin County, Minnesota
My commission expires January 31, 2000.

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C O N F I D E N T I A L

C E R T I F I C A T I O N

I, VICTOR CORBETT, M.D., the deponent, hereby certify that I have read the foregoing transcript consisting of pages 176 through 330, and that said transcript is a true and correct, full and complete transcription of my deposition except:

VICTOR CORBETT, M.D.
Deponent

Sworn and subscribed to before me this day of , 1997.

Notary Public
My commission expires

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